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CANADIAN

COMMITTEE ON

The Judge and the Psychiatrist BRECTION Toward Mutual Understanding

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Director, Mental Health Clinic
Hamilton, Ontario

Address given at annual meeting of the Ontario Association of Juvenile and Family Court Judges, September 26, 1958

I. Introduction

It has been always an awesome experience for me to stand before a judge. Today, as I stand before this august group of judges, I find it difficult to shake off that feeling of awe in spite of the cordiality with which I have been received. I try to console myself with the thought that at least some of you might feel just as uncomfortable facing a group of psychiatrists. But then I can hardly imagine you in such a position unless it would be to instruct us in how we should conduct ourselves in court. I have a feeling that some of us would benefit by such instruction.

If I stand accused of being a psychiatrist, I have already incriminated myself. I hereby confess, then, that I have practiced this way of life for twenty-seven years. In my defense may I testify that they have been years of rewarding adventure and gratifying crusading.

The exploration of the minds of mentally ill patients has been an adventure indeed. The attempt to penetrate to the origins of their fearful hallucinations, bizzare but intriguing delusions, emotional storms of rage or agonizing fear, wild flights of imagination and morbid depths of depression, has been challenging and often frustratingly baffling. The spirit of adventure has been revivified time and again by the new therapeutic discoveries that have come to hand through these years in such amazingly quick succession. The electro-shock therapies, the insulin therapies, psychosurgery, and the rapidly increasing number of tranquilizing drugs have revolutionized the care and treatment of mentally ill patients in the wards of our mental hospitals. These have been thrilling adventures and the end of them is not in sight. We are on the brink of new and still better ways of diagnosing and treating mentally ill patients.

These have been also for me years of crusading against old superstitions and false beliefs, against gross ignorance and irrational fears and prejudices on the part of the great general public regarding what so many of them still call "insanity" and "insane asylums". To change their concepts of mental illnesses and mental hospitals has been something of a battle for psychiatrists. It has been not only the beliefs of the laity that have challenged our efforts but those also of many of our older medical colleagues in general practice and other medical specialties as well as the learned members of other professions—the clergy, teaching, legal and judicial professions. It has been a wonderfully stimulating and encouraging crusade, and the end is not yet. Interest in psychiatry and mental health never has been so virile and great progress lies ahead.

Even more thrilling than all this to me has been my interest in preventive psychiatry, mental hygiene, or mental health. This is our work in the mental health clinics. It has proved to be indescribably rewarding to work with children, young people, and adults with borderline habit, emotional, personality and social adjustment problems in their early stages. Our aim is the prevention of personality handicaps or their correction before they reach the stage of mental illness, delinquency, crime, addiction or other hampering life maladjustments. In this connection it has been my pleasure to co-operate at one time or another with juvenile and family courts in some ten counties in Ontario. I owe a great deal to the judges of those courts for their co-operation and to some of them for their understanding tolerance of some of my early bungling efforts. I am honoured to count them as friends.

II. Changing Attitudes

It is interesting to consider some of the changing attitudes one has experienced and witnessed. In my youth most psychiatrists worked in asylums and even lived on the grounds thereof. It was whispered that they were peculiar ducks who gradually grew more like the patients among whom they lived. Those who practiced in the community were few and far between. They were something to be looked at with a combination of awe, suspicion and pity. Such were the feelings I sensed regarding myself when I first went into psychiatry. Indeed, when I ventured out into the community to take an interest in community affairs and to give lectures (for I have always like to talk), not a few people have found courage enough to confide in my wife that I was not at all like they expected a psychiatrist to be. (I still do not think I am, although I am growing more that way as I get older).

I have sensed four phases in the changing attitudes of judges, magistrates, probation officers and social workers towards psychiatrists as they have sallied forth from the mental hospitals to work in and offer their services to the community. They have been those of resentment, expectation, disappointment and co-operation.

1.—Resentment

Those young upstarts who came buzzing out of their barred asylums to tell teachers how children should be taught, parents how children should be raised, social workers how problems should be handled, and judges what should be done about delinquents could not help but stir up resentment in many quarters with their stinging remarks and presumptuous manner. I must admit that some of us thought we knew an awful lot when we emerged fresh from the thrill of our psychiatric training. Glib was our use of such terms as impulsive urges, complexes, repressions, obsessive-compulsive reactions, immaturity, not to mention ego, id, super-ego, unconscious, subconscious, and that magical word, psychotherapy. That was the psychiatric panacea whereby the emotional ills of the individual, the home, society, and the whole world were to be cured. In our psychiatric adolescence some of us must have been almost insufferably irritating. We had much to learn in those days and we still have much to learn.

2.—Expectation

In all fairness it must be said that we were given the opportunity to prove our worth. In Ontario our mental health clinics were flooded with cases, many of whom were referred from juvenile and family courts as well as from magistrate's courts. Judges, social workers, the clergy, teachers and parents awaited the expected startling results of the analyses and treatments of the clinic team of psychiatric social worker, psychologist and psychiatrist.

We did not cure all the patients. We did not straighten out all the problems. We did not always come up with the right answers. But the team-work of the juvenile and family court and the mental health clinic has accomplished a great deal. Many parents and children have been helped. In the clinic setting parents and children have been encouraged to talk freely, to express their feelings and pour out their worries, resentments and fears. Then, as we learned to gather social workers, probation officers and teachers around a conference table with the clinic staff, we learned the value of co-operation.

3.—Disappointment

Those who expected psychiatrists to be infallible and all-knowing were soon disillusioned. Especially disappointed were those who expected the psychiatrist to be able always to detect a patient's untruthfulness. I, myself, have been hoodwinked by both patients and their relatives. Indeed I once had my keys stolen out of my pocket by a boy I was examining for a juvenile court. The fact that psychiatrists have disagreed regarding the sanity or insanity of a patient has not been reasuring to those who had hoped to rely on their judgement. It is no wonder that some judges and magistrates have lost confidence in the report made by the psychiatrist or clinic after a single examination, and have been remanding their cases on a thirty day warrant to a mental hospital. That there are still many

judges who refer cases to our mental health clinics, however, must mean that we still have something to offer.

4.—Co-operation

I have no hesitation in admitting that any success my clinic has had in being of service to the juvenile and family courts has been due largely to the wonderful co-operation I have received from the judges, court staff, probation officers, social agencies and schools involved. We have arrived at the day of team co-operation. It is in this direction that we can look for future progress and success.

III. Differing Orientations

1.—Concerning Understanding

If there is to be co-operation in dealing with children and adults referred for psychiatric examination from the juvenile and family courts, there must be mutual understanding between the members of the different disciplines dealing with these individuals. Two of the principal persons involved are the judge and the psychiatrist. Unless they understand and respect each other's orientations and viewpoints something less than ideal co-operation will result, to say the least. This is true more especially since both of them are authoritative figures.

2.—Concerning Authority

The judge is a person of authority by legal right and by common acknowledgement. Nobody has the right to dictate to him in his court. If he sees the recommendations of the psychiatrist as a medical directive he may resent them understandably as challenging his authority, unless the psychiatrist has certified the accused as mentally ill or mentally defective. Judges are human and have felings that can be hurt and are more likely so to be if they fail to understand the psychiatrist's position.

The psychiatrist, as a physician, has inherited the traditional status of being a person of authority. Mankind has accepted "the doctor's orders" as authoritative for centuries, although to an increasingly less degree in recent years. The slightest hint of their lessened authority puts many sensitive physicians on the defensive and generates resentment in them. The psychiatrist often is human enough to suffer from hurt feelings also, when the judge does not find his recommendations acceptable. Gibson¹ suggests that not infrequently the psychiatrist himself is to blame for being so unfamiliar with the problems of the court that his recommendations are impractical.

3.—The Judge's Orientation

To understand the judge's orientation the psychiatrist must realize that it is the judge's principal duty to dispense justice while protecting society. Regardless of the strength of his desire to help the guilty offender, his decision must be influenced by his responsibility to protect society. His disposal of the case must be calculated to deter the offender from repeating the offense and to discourage other potential offenders from a similar breach of the law.

4.—The Psychiatrist's Orientation

The psychiatrist's orientation, on the other hand, must be principally the welfare of the offender, whom he views as a patient. He sees his duty to be the diagnosis of the offender's maladjustment and the treatment of whatever hampering conditions contribute to that maladjustment. The psychiatrist is concerned with the offender's weaknesses, handicaps, motivations, irritations and all the environmental circumstances that have contributed to his unacceptable behaviour. If he seems to excuse the offender, or to suggest treatment when the law demands punishment, it is because of his orientation rather than his desire to assert his authority.

A case in point is the teenager with a sexual conflict who seeks an outlet for his tension in stealing. It might be difficult for the judge to view the offender as a sick person in need of treatment as suggested by the psychiatrist.

5.—A Common Goal

Ultimately the judge and the psychiatrist have a common goal—the prevention of suffering for as many as possible. Both of them are, in essence, treaters of the ills of mankind. One may regard those ills as wilful misdeeds needing punitive correction, while the other regards them as disease mechanisms resulting from internal or external irritations and in need of treatment. Both want them cured. Mutual co-operation should enhance their chances of attaining that goal.

IV. Co-operation

1.—How Can the Psychiatrist Help the Judge?

The question of how the psychiatrist can help the judge best has been my concern whenever I have been faced with a patient referred from court. Such a person usually comes with the understanding that he is to be examined to see if he is insane or if there is anything wrong with his head. I have been told by more than a few that the judge ordered him to be sent to have his head read. Perhaps that is why juvenile offenders commonly refer to psychiatrists as "head-shrinkers". Certainly ninetynine per cent of those referred to me from court come without a hint from the judge as to what help is expected from the psychiatrist. From my occasional social conversations with judges and magistrates I feel sure that they want from the psychiatrist something more than a brief statement as to the accused's mental health or disease and his intellectual competence to know right from wrong or to be accountable for his acts.

It has been my practice to assume that such a definite statement was of paramount importance to the judge. Over and above this, however, I have presumed to include in my report the analysis of the pertinent facts of the accused's heredity, home conditions, education, work history and social adjustments and a description of his personality traits as discovered by myself, my staff, and those we have consulted regarding him. I have presumed to indicate what seemed to me to be important factors contributing to his behaviour. I have presumed, also, to indicate what might be done to give the accused the best chance of more adequate social and personal adjustment in the future. If, at times, I have been too presumptuous I trust that my zeal for the welfare of the accused (who became my patient when he walked into my office) may have been excused. Such has been my understanding of what help a psychiatrist could give a judge.

The psychiatrist's report should be definite, to the point, factual, devoid of medical and psychiatric jargon, and concise. The information preceding any recommendations that are made should lead to an understanding of their advisability. The psychiatrist should take pains to be reasonably sure of their practicability. It goes without saying that the psychiatrist will have more freedom of expression if he can count on the judge to regard the report as confidential and not to read it verbatim to the accused or his relatives or allow it to fall into their hands.

2.—How Can the Judge Help the Psychiatrist?

The most important help the judge can give the psychiatrist is to recognize his need for factual information about the person referred for examination and to take steps to see that it is available to him. It is a most disconcerting experience to have an accused person arrived at one's office in charge of a police officer without even an order for his examination, or a word regarding his charge, his conviction, or anything else about him. With only the prisoner's statements to go on and no means of verifying their veracity the psychiatrist's task is formidable, especially if his report is requested for the next day's court. This has happened to me many times from a magistrate's court but seldom from a juvenile and family court, thanks to my friends the probation officer or children's aid society social worker. A word from the judge as to why he requested the examination would be of great help to the psychiatrist.

Secondly, the judge can help by ordering both of the parents, fosterparents or legal guardians to accompany juveniles referred for examination. It is so important to know the attitudes of both parents to the child and to note their reaction to him in the waiting-room and office. Also, in cases of marital discord, both wife and husband must be seen by the psychiatrist if he is to have a fair chance of assessing the true nature of the problem and the causal factors thereof. Thirdly, the judge can help by giving the psychiatrist ample time for his investigation and report.

Finally, the judge can help by the manner in which he refers the accused to the psychiatrist. To send him for examination with the belief that he should be considered "insane" or with a fear of being found so, hampers the psychiatrist tremendously. Much valuable time must be lost in such cases in establishing sufficient rapport with that person to gain his trust and co-operation, if, indeed, it is possible in the time available. If he resents, fears or mistrusts the psychiatrist it may be impossible to ascertain his real feelings and thought reactions. If the idea of the psychiatric examination could be explained to the accused as an attempt to help him and give him a break, the psychiatrist would have a better chance of penetrating his defense mechanism and of understanding the type of person he is in reality.

V. Thoughts on Delinquency and Crime

1.-Of Punishment and Treatment

The great majority of children and adults who break the law, upset their homes or behave in a delinquent manner do so because they are uncomfortable people. Their offences are evidence either of their attempt to find comfort or of their rebellion against those they consider to be the cause of their discomfort. Their dis-ease cannot be alleviated by making them more uncomfortable, unless the period of increased discomfort makes them more amenable to the acceptance of the conditions which will make them comfortable. Punishment accomplishes its purpose only if it results in the person who is punished accepting the restrictions he has violated or if it results in making him willing to co-operate with those who desire to help him learn so to do. If punishment only increases the punished person's resentment and hatred, it serves only to set up a vicious circle, and the last state of that man is worse than the first.

Ideally, the uncomfortable person, be he child or adult, needs love, praise, success, a feeling of being understood by someone, a sense of worthwhileness, and a set of moral values resulting from a spiritual commitment to a satisfying faith.

The court has at its command an effective form of treatment for both children and adults in the early stages of delinquency and crime. I refer to probationary supervision which is skilfully and adequately carried out. It has been my pleasure to co-operate with some notably skilful and effective probation officers. (In a consultant capacity, that is.) I know what has been accomplished by those who have won the offender's confidence, have given him hope and made him feel worthwhile, have helped him to find identification with a suitable group, and have sought to put him in touch with someone who could minister to his spiritual needs.

Thus have they contributed to his mental health by helping him feel more comfortable about himself, more comfortable with others, and willing and able to carry his share of the responsibilities of life. When they have enabled him to help some other person, their efforts have been worthwhile indeed.

2.—Of Causes of Delinquency

There is no panacea for delinquency and crime because there are so many causes. The blame can be attributed to almost anything—too much strictness or not enough discipline—too much pampering or not enough love—expecting too much of children or making things too easy for them, ad infinitum. To ask what is the chief cause of delinquency is like asking what is the chief cause of sickness. Each case is unique and must be considered individually. The cure is not to be found in setting up a curfew, increasing discipline, urging judges to be more strict, or cracking down on parents. The greatest hope lies in indoctrinating parents, teachers and youth leaders to look for the early signs of a child's discomfort, unhappiness and failure to feel worthwhile, accepted and useful, and to move to his aid and support at the earliest possible moment. Indeed, we should come to the aid of the mother who is worried about his uncomfortable infant or pre-school child, for the seeds of delinquent behaviour are sown in the early years of the child's life.

We still have in our midst neglectful, selfish, drunken, money-grabbing, and pleasure-loving parents at whose door the blame for the delinquency of their children or the unhapipness of their marriage can be laid directly. But we have also many parents who are confused regarding how children should be disciplined. Their vacillating attitudes and unpredictable swings from punishment to giving in and back to punishment confuse their children and make them uncomfortable indeed because they never know what to expect. The children's rebellious behaviour embarrasses their harassed parents to the point of rejection. In their resentment they tell these frustrating children that they are bad, disliked and unwanted. If children believe that nobody likes them it is only natural that they try to get the best of everyone they can, if they have gumption enough to fight. If not they will cringe, give up, become physicaly ill, withdraw from reality and even retreat into mental illness. Helping parents understand their children will help prevent delinquency and mental illness.

3.—Of Delinquency Prevention

To those of you who are interested in what is being done these days in the study of the prevention of delinquency I commend a booklet by Witmer and Tufts² on "The Effectiveness of Delinquency Prevention Programs". There is also an interesting article in The Journal of Federal Probation³ dated December 1956, on "A Community Approach to Delinquency".

A body of scientific knowledge regarding delinquency is being accumulated but is still in its infancy.

VI. Conclusion

As I bring this paper to a termination, may I speak a word on behalf of psychiatrists in the words of Dr. Guttmacher, director of the Court Clinic for Baltimore as quoted in that excellent book "Crime, Courts and Probation"? "We psychiatrists have no crystal balls and we are not infallible, but our clinical training and our psychiatric experience, aided by an understanding of the revelation of adjuvant psychological tests, does give us a special insight into the offender's makeup and qualify us to express an opinion as to his reformability and his potential danger to society, as well as the existence of mental disease . . ."

May I again express my gratitude to all those who have assisted me in my efforts to help the offenders who have been sent to me? May I also congratulate you judges of the family and juvenile courts of Ontario for the wonderful work you are doing, as you, and those sincere and able probation officers and social workers who co-operate with you, help children and adults toward social adjustment and mutual understanding, you are contributing to the welfare of individuals, families, and the communities in which you serve.

Finally, may I leave with you a question for your consideration? Would anything be accomplished if parents of offending children could be persuaded by the court to attend a series of group discussions structured by a committee, chaired by a probation officer, in conjunction with a consultant psychiatrist? Would it be worthwhile trying?

Dr. Brillinger expose dans cet article le meilleur mode de collaboration possible entre le juge et le psychiatre.

Gibson, Robert W., M.D. "The Psychiatric Consultant and the Juvenile Court", Mental Hygiene, Vol. 38:3 (July 1954).

Witmer, Helen L., and Tufts, Edith. The Effectiveness of Delinquency Prevention Programs. Washington: U.S. Department of Health, Education and Welfare, 1954.

³ Leonard, Charles W. "A Community Approach to Delinquency", Federal Probation, December 1956.

⁴ Chute, C. L. and Bell, M. Crime, Courts and Probation. New York: The Mac-Millan Co., 1956.

Probation: Theory and Reality

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Introduction

This paper presents a number of arguments regarding the nature of probation at the present and what it should be like near the year 2058. It examines probation after the first hundred years of its existence in North America and points to directions in which it should be moving, if it is to improve in the next one hundred years. These remarks are polemical in tone, designed to stir up discussion, rather than to offer compliments on the job now being done. Parenthetically, too much space is given to complimentary statements about probation at present, and it is time for a critical look at what is being done.

Many of the remarks below are not specific to probation, but, rather, represent criticisms of correctional processes as a whole. In the remarks to follow, some realities of probation are presented. From this, discussion turns to some of the areas in which change might be desirable.

The Present State of Probation

Probation work in North America began about 1850 with the work of John Augustus.¹ Since then, the character of probation has changed considerably. One change has been in the rationale for probation. Although at one time this rationale was not clearly stated, there is now a considerable literature which presents a theory of probation. This theory indicates that probation allows the offender to remain in free society; it preserves the social status of the offender at least in part; it preserves the social adjustment of the probationer in terms of stable employment, stable marital patterns, etc. Probation also saves the state money and provides a mechanism by which restitution can be extracted from persons who steal property. Much of this theory is humanitarian in nature, rather than rational. That is, it is argued that probation should be used to "give the offender a second chance" rather than that probation should be used because, relative to other dispositions that could be made, probation results in lower rates of recidivism.

Probation theory also indicates the nature of an ideal probation service. This would be one which had, among other things, a flexible law allowing persons to be placed on probation regardless of type of offense or prior law violations, qualified judges, a non-political form of organization, small caseloads which would allow casework treatment of probationers, in-service training, and other characteristics.

Finally, probation theory suggests that treatment should be the major function of probation. The major goal of the probation officer should be to change the behavior of offenders in such ways that criminal behavior would not be repeated.

Although the theory of probation has become well developed in the past 100 years, what is actually done in probation is not consistent with this theory. Generally, the available evidence from various locales suggests that probationers are not usually selected so much from the standpoint of the relative merit of this form of treatment in their cases, but, rather, they represent persons who do not need probation or any other kind of treatment, or because they are persons who do not offend our moral codes too greatly. The largest single category of probation cases seems to be persons who are not career criminals and who do not need much treatment. Of the more serious offenders, embezzlers and forgers are much more likely to be placed upon probation than burglars and robbers.2 The former may profit from this form of treatment, but, by the same token, the latter would probably also profit from probation. Nevertheless, these kinds of persons are not placed on probation, although from a rational standpoint this would be in many cases the best treatment decision that could be made relative to the alternatives.

Basically, these differences in the proportions of offenders of different kinds placed on probation stem from the fact that while probation is punitive in nature, society demands a more punitive form of treatment for certain offenders. That probation may at the same time be treatment should not obscure the central fact that whatever is done with criminals in American and Canadian society is done for punitive reasons first, and treatment is secondary. Obviously this implies that if probation is to be more widely used, it will have to become defined by judges and the public as sufficient punishment for most offenses. Otherwise, the probation officer will continue to recommend probation only for those low risk cases which are likely to be granted probation by the magistrate.

There is another factor which enters into this selective process in which low risk cases not needing treatment are selected for probation. In the first one hundred years of probation, what has generally occurred has been that untrained persons have been gradually replaced by graduates of schools of social work and other academic disciplines as probation officers. Persons who are asumed to possess treatment skills have replaced laymen. But excessive caseloads have not been reduced. Caseloads almost everywhere still remain so high that virtually no treatment takes place. Rather, most probation officers spend their time traveling, writing reports, keeping routine surveillance over probationers, and, in a few cases, rendering some sort of superficial aid to their clients.³ Professional training is not important for the performance of these routine tasks. The probation officer

role as it is presently defined could be performed by any person with an average IQ and some training in bookkeeping. The excessive work loads of probation officers serve to nullify their professional training.

In California, for example, where probation has become highly developed, caseloads averaged 205 probationers per officer in 1956. As a result, persons selected for probation represent individuals who would probably succeed in spite of probation and, in some cases, persons who have been involved in some less visible type of property crime, i.e., forgery and embezzlement. With these high caseloads, probation officers would be unlikely to recommend probation for more serious offenders even if they felt that these recommendations would be followed by magistrates.

What has occurred in probation, then, is that untrained persons have been replaced as officers by holders of college degrees. To this extent, probation has become professionalized. But the consequences in the way of more and better treatment have not followed from this change. The professional literature of probation which suggests that probation is now a treatment process in which offenders who might otherwise get involved in crime careers are rehabilitated is largely in the nature of fiction. Given the high caseloads of the present and the prejudices against probation as a form of leniency, it could hardly be otherwise.

It might appear from the above that if probation staffs could be doubled or tripled, effective treatment would begin to take place, inasmuch as probation staffs have been professionalized. But some critics of probation have argued that this "professionalization" is not professionalization in any real sense. Professionalization does not result simply from the substitution of some kind of formal training for untrained backgrounds. The training must fit the needs of the job to be performed. A mere college degree does not give a probation officer skills not shared by a laymen. Professionalization of a field implies the monopolization of specific skills by the professionals, skills which are related to the function to be performed and which are not shared by outsiders.

It does not appear that probation officers have any monopoly of skills for this kind of work. Probation officers show a variety of academic backgrounds. (The principal skill used in probation still seems to be common sense, and probation officers have no monopoly on this.) But even if probation administrators were successful in tailoring the job requirements so that only persons with a master's degree in social casework could become probation officers, it is still unlikely that true professionalization would result. These kinds of persons, who now seem to be the preferred candidates for probation jobs, do not represent the most effective treatment persons that could be produced. If this is true, probation would still not reach maximum efficiency even with greatly reduced caseloads.

Critics have indicated that social casework is by no means an ideal kind of training for probation. Ohlin, Lejins and others have indicated a need for more material on crime causation to be built into the training of professional correctional workers.4 Briefly, the argument holds that probation is not the application of generic skills of casework to a specific field. Rather, the problems of probation are sufficiently unique as to demand specialized knowledge of crime causation on the part of the probation officer. Probation involves certain punitive considerations unlike those encountered in any other field of casework. It is unrealistic to speak of probationers as "clients", for they are not persons who come voluntarily for help. Because they are captive clients, they represent unique problems for treatment. It is not enough to caution the beginning probation officer that he will have to develop techniques involving wise use of authority. Training for probation must spell out the techniques which are to be used; otherwise the officer is told about a problem he will encounter, but not how to solve it.

Critics of casework training have pointed out that probationers are unique in another way. They come from backgrounds that are atypical of most casework clients. They have attitudes not found in most casework situations. As a result, the probation officer must have a body of knowledge about the nature of criminal clients and ways in which these persons can be handled. This knowledge can be gained in two ways, either as a result of living with criminals or as a result of criminology training which indicates the nature of offenders.⁵

Casework training for probation has tended to view the client-caseworker relationship as not only the best but the only successful approach to working with offenders. There is, in fact, no evidence to indicate that this kind of treatment technique is successful. In fact, available evidence suggests that there are alternatives in the way of group techniques, harsher types of treatment, etc., which may have more to recommend them than the traditional two-person social casework relationship in crime treatment. Some knowledge of these alternative techniques might be better communicated if casework training were to be modified on the basis of what is now known about crime causation and probation.

If the above criticisms have merit, it follows that the ideal kind of probation officer training would be a combination of a sound undergraduate degree in sociology with specialization in criminology, coupled with some graduate work in casework skills. Anything short of this would mean that probation officers would not have the skills required for an efficient treatment service. But this is not enough as will be indicated later, for certain other developments are needed in academic criminology.

In summary, this brief survey of contemporary probation suggests that probation is not much different from what it was one hundred years

ago. Academically trained persons have been substituted for laymen. Persons who do not need and do not necessarily profit from probation are being selected as probationers in large numbers, today as one hundred years ago. Although these persons are supposed to be treated, in fact they are given only superficial help by the probation officer. Yet they succeed in about eighty per cent of the cases, suggesting that probation is incidental to success. Probationers succeed in spite of probation, not as a result of probation. Statements to the contrary in the theory of probation represent an inconsistency between fact and theory:

The Future of Probation

The foregoing discussion of probation indicates that it is not now an alternative form of treatment to fines, gaols or institutions, which is applied to probationers on the basis of decisions that the relative gains to the offender are greater than for one of the other dispositions available. Probation cases are not now selected on that basis. Even if probation staffs were increased in size so that realistic caseloads became common, it is still unlikely that probation would have this character. Probation in theory and fact must be revised if it is to become a rational process, involving principles of applied science in the case of criminals. A rational, applied-science process would mean that those things which are done to probationers and other offenders would be the most effective alternatives of available procedures, in terms of rates of recidivism.

If it is agreed that this is what probation should attempt to become, then basic changes are necessary which go well beyond increases in budget or the employment of more officers. One basic decision which has to be made is actually outside the immediate concern or ability of probation administrators. This involves a change in the public and juristic views of probation. As long as probation is seen as a form of leniency to be given to only the more deserving offenders, rather than as a punitive-treatment technique which is more effective with some offenders than certain alternatives, a completely rational model for correctional decision-making in probation cannot be developed. But granted that legal and public attitudes toward probation do not change overnight, desirable changes in probation can still be outlined.

The first and most important improvement which needs to be undertaken is to construct a model for decision-making, that is, a classification of offenders, from which strategies of treatment could be devised, and which would form the basis of correctional decisions. These decisions, in turn, could be subjected to empirical test.

This model should become a part of the basic training of probation officers, so that a stable body of knowledge might develop among probation workers, replacing the intuitive procedures now in use. What is proposed

here is the construction of a systematic typology of offenders which would clarify the nature of criminal behavior and would point to kinds of treatment which are needed for different types of offenders.

There is nothing revolutionary about this suggestion. The literature of criminology in the past twenty years has been full of arguments that crime is a heterogeneous phenomenon, made up of offender types who differ from each other and who do not profit from the same type of treatment. In actual practice, this is the assumption behind movements toward diversified treatment of criminals. Similarly, in the day-to-day operations of probation officers, these persons use some inarticulate conception of differences among groups of criminals which make probation advisable for one group, inadvisable for others.

While the movement toward a typological classification of offenders has begun, academicians have not proceeded beyond the general claim that such efforts should be undertaken. Similarly, the implicit classifications of offenders used by persons in institutions, parole and probation have not been formalized and standardized. Consequently, the classification used by one person may have little in common with that used by another. What is called for is the creation of a formal typology of criminals, in which the characteristics and genetic development of each type is specified in detail.

Although no formal typology of this kind has been presented in the criminological literature, the present author is involved in the construction of such a device.7 This typology cannot be presented here in detail, but a few comments might clarify the nature of the undertaking. Briefly, this classification attempts to specify the nature of criminal types, most of which have already been identified in the existing etiological research. Fourteen types of adult offenders and eight types of juvenile delinquents have been described. These types have been developed from a logical analysis of research in which the characteristics of offenders have been assembled into an orderly system. The characteristics of offenders have been classified according to a specific number of dimensions or factors regarded as crucial in the case of crime. Among others, these dimensions involve concepts such as criminal role, attitudes and self conception, family and social class background, etc. Hopefully, it will be possible to construct this classification with sufficient precision and clarity that persons in an actual correctional setting can be identified as falling into one or another of the types. (Copies of this classification are available from the author upon request.)

Basically, what has been involved in the development of this typology has been to organize the etiological knowledge of crime in a specific way. It is argued that this presentation can be more easily seen by the correction worker as relevant to his activities, for it presents etiological data in such a way that the correctional worker may be able to recognize similarities between persons in his caseload and individuals described in the typology. From this classification, various hypotheses can and in some cases have been made about alternative strategies of treatment which should be undertaken with different types of offenders. For example, the classification of adult offenders recognizes three types, among others. These are the quasi-professional property offender, the alcoholic forger or cheque-writer, and the accidental property offender. In a probation setting, what would be implied in these classifications in the way of treatment would be that in the case of the accidental offender, who can be recognized by certain characteristics, the only treatment called for would be to reinforce his noncriminal attitudes. Little probationer-officer contact is needed. In the case of the cheque writer, who appears to be a dependent person who writes bad cheques because he lacks awareness of law-abiding ways of solving problems, treatment should be devoted to building up a fund of solutions. This could probably be accomplished within the traditional caseworker-client relationship. For the quasi-professional property offender who is usually well-adjusted to the criminal role, and who has primary group ties with other offenders, some other technique designed to alter the nature of group attitudes is required. The usual worker-client relationship is not likely to succeed here.

If a formal typology of the sort discussed here were defined, and if further research supports these descriptions of offenders, this would provide corrections with a model on which etiologically-based, rather than intuitive, decisions could be made. Some research is already under way in the states of Washington and California to verify some of these typological descriptions. One final development is needed. Not only must alternative techniques of treatment be devised for different offender patterns, but also policy research must be conducted to verify the merits of these decisions. Research of this type is all too uncommon. For example, the Borstal system is usually defended on the basis that it gets higher success rates than the penitentiary. But these results might occur because of the selective processes involved in assigning offenders to different institutions, not as a result of Borstal treatment. Obviously, if research were to show no improvement in success rates for similar types of persons in Borstals or prisons, the Borstals should probably be closed up, in view of their higher per inmate cost.8 What must be shown is whether or not probation or some other form of treatment gets higher success rates with certain types of offenders than some other form of treatment applied to similar offenders. Until this kind of evidence develops, the defense of various programs will have to be on humanitarian rather than empirical, rational grounds. There are some encouraging signs that the research which evaluates various programs in California is going to become more common elsewhere in North America.

One hundred years may be too short a time to expect the changes outlined above to occur. But if progress is made in this direction, there will someday be reason to claim that probation and other correctional processes are truly professional and effective, rather than guess-work processes.

- Harry Elmer Barnes and Negley K. Teeters. New Horizons in Criminology. New York: Prentice-Hall, Inc., 1951, pp. 758-775.
- ² See, for example: Lewis Diana, "Is Casework in Probation Necessary?", Focus, January 1955, pp. 1-8; Ralph W. England, "A Study of Postprobation Recidivism Among 500 Federal Offenders," Federal Probation, September 1955, pp. 10-16; Ralph W. England, "What is Responsible for Satisfactory Probation and Post-Probation Outcome?", Journal of Criminal Law, Criminology and Police Science, March-April 1957. The annual reports of the Bureau of Criminal Statistics, State of California, reflect the same selective processes in probation. See: Crime in California, 1957, Department of Justice, Bureau of Criminal Statistics, 1957, p. 82.
- 3 Diana, op. cit.; England, "A Study of Postprobation Recidivism Among 500 Federal Offenders," Federal Probation, September 1955, pp. 10-16; England, "What is Responsible for Satisfactory Probation and Post-Probation Outcome?", Journal of Criminal Law, Criminology and Police Science, March-April 1957; Gertrude M. Hengerer, "Organizing Probation Services," N.P.P.A. Yearbook, 1953, pp. 45-59.
- 4 Lloyd Ohlin, Herman Piven, Donnell M. Pappenfort, "Major Dilemmas of the Social Worker in Probation and Parole," N.P.P.A. Journal, July 1956, pp. 211-225; Peter Lejins, "Criminology for Probation and Parole Offices," N.P.P.A. Journal, July 1956, pp. 200-207.
- There might be something to be said for hiring ex-probationers and ex-parolees as probation and parole officers! It is likely that these persons would more easily establish treatment relationships with offenders than many middle-class probation officers who have an inadequate conception of what offenders are like. This characteristic seems to be one of the most important ones for street-workers in the New York City Youth Board program. See: Walter Bernstein, "The Cherubs are Rumbling," New Yorker, Sept. 21, 1957; Stacy V. Jones, "The Cougars," Harpers, November 1954, pp. 35-43. Our recent recognition that the prison guard may be potentially the most effective treatment person in prison seems to be based on the same considerations, namely, that guards are more similar to inmates than any other group of administration persons and might be more likely to establish meaningful treatment relationships.
- 6 See, for example: Lloyd McCorkle, Albert Elias, F. Lovell Bixby. The High-fields Story, New York: Henry Holt, 1958; Chester Paremba, "Group Probation: An Experiment," Federal Probation, September 1955, pp. 22-25; LaMay Adamson and H. Warren Dunham, "Clinical Treatment of Male Delinquents: A Case Study in Effort and Result," American Sociological Review, June 1956, pp. 312-320.
- 7 Don C. Gibbons and Donald Garrity, "A Preliminary Typology of Criminals," and "A Preliminary Typology of Juvenile Delinquents," mimeographed.

8 Fortunately, the evidence, at least in England, suggests that Borstals get better success than other institutions with the same kinds of offenders. See: Hermann Mannheim and Leslie T. Wilkins, Prediction Methods in Relation to Borstal Training. Her Majesty's Stationery Office, 1955.

L'auteur dit que dans la pratique, les responsables des services de liberté surveillée n'observent pas toujours les principes de leur profession parce que d'une part, le nombre excessif de cas à la charge de chacun d'eux, ne permet pas d'accomplir un travail de haut calibre; et que d'autre part, nous n'avons pas encore réussi à préciser suffisamment la méthode de formation professionnelle des délégués à la liberté surveillée.

Le dépistage des délinquants sexuels à l'aide d'une technique de projection*

PIERRE MORIN

Etablir dès leur arrivée une différenciation entre les détenus, à partir d'un diagnostic rapide et sûr, constitue un problème épineux pour le service de classification d'une institution pénitenciaire. On voudrait, en particulier, être en mesure de dépister tous les individus, chez qui les impulsions sexuelles sont suffisamment anormales pour influencer le comportement social à l'intérieur comme à l'extérieur de l'institution. De même, l'importance d'un jaugeage immédiat de l'équilibre psychique du voleur, en regard de ses possibilités de réhabilitation, ne saurait être mise en doute.

De tels problèmes présentent parfois des complications inattendues. Il arrive, par exemple, que le psychologue ait devant lui un individu inculpé de délit sexuel, en vertu d'un concours de circonstances qui n'ont en fait pratiquement rien à voir avec son comportement habituel. Par contre, bien qu'arrêté pour un délit de nature tout autre, un détenu est peut-être susceptible de manifester, par la suite, une sexualité anormale, au détriment du milieu dans lequel il se trouve. C'est avec l'intention d'écarter, de prime abord, de pareilles méprises, malheureusement toujours lourdes de conséquences, que cette recherche fut entreprise.

Lorsqu'il s'est agi d'opter pour une technique adaptée à cette fin, nous avons songé à la "Batterie de tests de projection de Verdun" (Verdun Projective Battery), élaborée par Lehman et Dörken^{9,10}. C'est elle, en effet, qui nous a semblé le mieux répondre aux exigences suivantes: A) recours à une technique valide et normalisée, offrant la possibilité de mesurer, ainsi que nous nous le proposions, certains traits communs aux individus d'un groupe donné en regard d'une population normale; B) administration rapide et quantification facile, cela s'avérant indispensable à cause du nombre des sujets à examiner et du peu de temps disponible.

Le V.P.B. comporte les sous-tests suivants: A) le Rorschach à choix multiples, mis au point par Harrower et Steiner⁵; B) un test d'association orale chronométré, comprenant dix mots choisis par les auteurs en raison de leur usage très courant et des interprétations qu'ils suggèrent; C) un

^{*} Extrait d'une thèse soumise à l'Institut de psychologie de l'Université de Montréal, en vue d'obtenir la Maîtrise ès-Arts.

test d'association qui exige le recours à l'écriture et non chronométré, test qui comprend dix mots tirés des tables de fréquences de Kent et Rosanoff¹¹ et qui est destiné à fournir un indice de conformité.

Normalisée dans un hôpital d'aliénés mentaux, cette batterie de tests de projection fut constituée, à l'origine, en vue de faciliter le diagnostic différentiel de la psychose chez des individus qui en pouvaient être atteints.

Un examen attentif des travaux antérieurs, relatifs au problème qui nous intéresse ici, nous a amené à attribuer au voleur récidiviste une structure de personnalité sensiblement plus voisine de la normale que celle du délinquant sexuel. Contentons-nous de renvoyer, pour l'instant, aux études de Bloch¹, de Hartung⁶, de Sutherland¹².¹³, de Tannen-baum¹⁴ et de Von Hentig⁶. D'ailleurs, on retrouve un point de vue analogue chez Fenichel qui, sur un plan plus général, s'exprime de la façon suivante: "Les actes criminels peuvent être commis par n'importe quel type psychologique qu'il soit normal ou pathologique. Nous pouvons dire que ce sont les criminels dits 'par accident' qui sont les plus nombreux. Ces criminels ont une structure psychologique normale et leur crime n'intéresse pas spécialement la psychopathologie"².

La personnalité du délinquant sexuel ou, plus précisément, de l'adulte s'adonnant de façon répétée à des pratiques dans lesquelles la société voit une transgression des normes de la sexualité normale a été étudiée d'une manière exhaustive par Karpman⁸. Or, comme on le sait, ce dernier insiste sur l'origine typiquement psychonévrotique de la plupart des délits sexuels, par opposition à l'origine plutôt sociale des activités déprédatrices. En s'appuyant sur les données du Rorschach, des recherches comme celles de Harrower-Erickson⁴ et de Tong¹⁵ tendent aussi à montrer que l'on peut s'attendre à rencontrer chez le délinquant sexuel des déséquilibres de la personnalité sensiblement plus accentués que chez le détenu ordinaire. Enfin, parmi les psychanalystes, Gillespie³ n'hésite pas à conclure, sur la base de l'expérience clinique, que les pervers demeurent fréquemment tout juste en deçà des confins de la psychose, quand ils ne finissent pas par y sombrer.

L'hypothèse principale de la présente recherche peut donc être formulée de la façon suivante: si on soumet un groupe de délinquants sexuels à une épreuvre qui permet d'évaluer leur équilibre psychique, on peut s'attendre à déceler chez eux des indices de névrose et même, dans certains cas, de psychose imminente, atteignant à un niveau significatif. On peut aussi s'attendre à ce que ces indices soient sensiblement plus élevés, donc révélateurs d'un écart beaucoup plus marqué de la normale, que ceux fournis par un groupe comparable de voleurs récidivistes.

Plus précisément, si l'on considère la nature de la "Batterie de tests de projection de Verdun", cette hypothèse peut se ramener aux présup-

positions suivantes: A) les résultats obtenus au Rorschach à un choix multiples par le groupe S (délinquants sexuels) seront, dans l'ensemble, plus élevés que ceux obtenus par le groupe V (voleurs récidivistes); B) les temps de réaction au test d'association chronométré seront significativement plus longs pour le groupe S que pour le groupe V; C) l'indice de conformité ne révélera aucune différence significative entre les deux groupes car, selon les auteurs de la Batterie, les résultats élevés ne se rencontrent que chez les psychotiques.

Deux groupes de trente voleurs récidivistes et de trente délinquants sexuels ont été constitués à partir de la population de deux pénitenciers, avec les précautions expérimentales requises. Le choix des sujets faisant partie de notre échantillon fut établi d'après des critères précis: langue maternelle (la batterie a été normalisée en anglais), âge (20 à 50 ans), genre et nombre de délits (au moins deux délits sexuels pour le groupe S, au moins trois vols pour le groupe V), temps écoulé depuis la dernière offense (moins de cinq ans), autres conditions destinées à rendre les deux groupes bien représentatifs. Par exemple, après lecture de chaque dossier, on a éliminé autant que possible, les voleurs récidivistes, soupçonnés d'activités homosexuelles, et les délinquants sexuels, dont les actes ne présentaient vraiment pas un caractère anormal.

Avant de passer à l'exposé des résultats, il convient de signaler certaines impressions recueillies au cours de l'expérimentation. Les voleurs nous ont paru souvent plus dégagés de la situation, plus indifférents et indépendants à l'endroit de l'expérimentateur, que les délinquants sexuels; lorsque quelque chose les contrariait, ils ne se gênaient pas pour le manifester. Plusieurs abordaient le test avec un sourire et faisait mine de n'y voir rien d'autre qu'un jeu. Quelques autres se montraient subitement ennuyés, surtout pendant l'administration du Rorschach, et rejetaient rapidement les cartes; ou encore, ce sous-test les amenait tout au plus à donner des réponses conventionnelles ou par trop objectives et ils verbalisaient ainsi leur attitude: "ce sont des taches . . . pas autre chose!" On retrouve là le souci fréquemment observé chez les délinquants, de ne pas s'engager personnellement, d'adhérer strictement à la réalité de tout le monde, de ne pas se laisser "avoir" par le psychologue.

Chez les délinquants sexuels, au contraire, nous avons remarqué des attitudes de dépendance ou de retrait méfiant et taciturne, accompagnées d'anxiété et de tension croissante, surtout au sous-test d'association de mots. Plusieurs devenaient mal à l'aise à la vue du chronomètre, s'enquéraient de leurs résultats, et voulaient recommencer.

En résumé, ces impressions qualitatives nous portent à croire que les récidivistes communs suraient un comportement plutôt alloplastique, extravert et ouvertement agressif en présence d'une situation frustrante, alors que les criminels sexuels seraient plutôt repliés sur eux-mêmes, inhibés et assaillis par une anxiété suffisamment intense pour mettre sérieusement à l'épreuve leur structure psychique.

Nous mentionnerons d'abord les résultats les plus généraux, c'està-dire les différences entre les scores globaux obtenus au V.P.B. par chacun des deux groupes, en nous en tenant aux normes telles qu'établies par les auteurs^{9,10}: 0 à 6, aucune indication de pathologie; 7 à 11, indication de troubles de personnalité; 12 à 45, psychopathologie confirmée. En répartissant nos données selon ces critères, nous avons obtenu les fréquences et les pourcentages inscrits au tableau I; ensuite, nous avons utilisé la technique chi carré pour déterminer le point de signification des différences observées. Rappelons que nous appelons groupe "S" celui des délinquants sexuels et groupe "V" celui des voleurs récidivistes.

TABLEAU I

Distribution selon les normes des scores globaux des groupes S et V.

		3		V
Normes	Fréquences	%	Fréquences	%
0 - 6	8	26.7	21	70.0
7 - 11	13	43.3	9	30.0
12 - 45	9	30.0	0	0
	30 100.0 30			
Somme:	30	100.0	30	100.0
Chi carré :	13.417	P/	2: .0	05

On voit que 70 pour-cent des voleurs récidivistes sont en deçà des limites de la normalité, et qu'aucun d'entre eux ne se situe dans la catégorie de la psychopathologie confirmée, alors qu'au contraire, 73 pour-cent des criminels sexuels sont classifiés comme anormaux, dont 30 pour-cent dans la catégorie des troubles psychiques graves; seulement 26 pour-cent d'entre eux demeurent dans la normalité. Le test chi carré démontre qu'il y a cinq chances sur mille que de telles différences soient dues au hasard.

Cette première analyse semble corroborer l'hypothèse générale que nous avons énoncée plus haut.

Pour comparer les résultats partiels de chaque sous-test de la batterie, nous pouvons nous servir des moyennes et des pourcentages de scores audessus des normes obtenus par les auteurs avec le groupe de standardisation (dont le nombre de sujets était de 100), et c'est ce que présente le tableau II.

TABLEAU II

Moyennes des groupes de délinquants sexuels, de voleurs récidivistes, et du groupe "normal" de standardisation du V.P.B., et pourcentages d'individus de chaque groupe au-dessus de la norme.

Groupes	Rors	chach				lice de iformité	
	M	%>6	M	%>6	M	%>6	
"Normaux" (N=100)	2.13	3.0	1.3	3.0	0.33	-	
Délinquants sexuels, (N=30)	5.20	23.3	4.23	30.0	0.60	3.3	
Voleurs récidivistes, (N=30)	4.3	13.3	1.10	0	0	0	

On observe qu'au premier sous-test (Rorschach à choix multiples) la moyenne des scores du groupe S est particulièrement élevée en regard du groupe de "normaux", suivie de près par la moyenne assez forte du groupe V. Le pourcentage au-dessus de la norme est aussi beaucoup plus haut chez les délinquants sexuels, et un peu moins considérable chez les voleurs récidivistes. Dans le deuxième sous-test, le groupe S est le seul à avoir une moyenne et un pourcentage aussi élevés, car le groupe V ne diffère aucunement du groupe normal, et on n'y trouve pas d'indices de troubles psychiques, alors que le contraire est évident chez les criminels sexuels. Enfin, dans l'indice de conformité, aucune différence n'apparaît entre les groupes, et ce sous-test ne semble pas avoir de valeur probante dans la présente recherche.

On peut connaître le degré de signification de ces différences en appliquant les techniques statistiques F et t directement aux scores de chaque groupe dans chaque sous-test, et le tableau III donne les résultats obtenus.

TABLEAU III

Moyennes et variances des résultats des sous-tests du V.P.B. pour les groupes S et V.

Groupes		ler sous-test	2ième sous-test	3ième sous-test		
S	M	5.2	4.23	0.6		
	02	5.49	14.56	•		
v	M	4.3	1.10			
	02	8.09	1.61	-		
Test F Niveau de signification		1.63	9.04	-		
		.05	.01	-		
Test t Niveau de signification				1.36	4.26	•
		.05	.01	-		

Au premier sous-test, il appert que les deux moyennes ne sont pas significativement différentes, contrairement à l'hypothèse énoncée plus haut, car la valeur de t est seulement de 1.36, alors qu'elle devrait être au moins de 1.68 pour permettre de rejeter l'hypothèse nulle au niveau de 5 pour-cent.

Au deuxième sous-test, la technique F fait voir une différence significative entre les variances des deux groupes, très élevée dans le groupe S plutôt homogène dans le groupe V; nous en tiendrons compte dans la comparaison des moyennes en diminuant de moitié les "degrés de liberté" (df) disponibles. On observe que l'écart entre les deux moyennes est très importante, car il y a moins d'une chance sur cent que l'hypothèse nulle se vérifie. Cette forte différence pourrait expliquer en majeure partie les résultats globaux du V.P.B. obtenus dans cette expérience.

Les résultats du troisième sous-test sont très faibles, et seulement deux délinquants sexuels y ont obtenu un score, ce qui, selon les auteurs du V.P.B., est un indice certain de trouble psychique grave. Ce sous-test n'apporte donc pas de différence qui nécessite une vérification statistique.

Les résultats du premier sous-test peuvent paraître surprenants, si l'on considère l'hypothèse générale de cette recherche. La faible différence

entre les moyennes des scores des deux groupes au Rorschach réside dans le fait que les résultats du groupe des voleurs récidivistes sont plutôt élevés (cf Tableau II). On peut en déduire que, même si l'organisation dynamique de ces derniers est en général moins pathologique que celle des criminels sexuels, ils n'en sont pas moins aux prises avec certains conflits névrotiques se répercutant dans leurs comportements anti-sociaux.

D'autre part, les auteurs du V.P.B. ont observé qu'un sujet de personnalité relativement normale ou en voie de retrouver son équilibre pouvait obtenir un score élevé dans ce premier sous-test, mais très bas aux autres sous-tests, constatation qu'ils résument ainsi: "Alors que les normaux ont habituellement des résultats plus élevés au Rorschach à choix multiples qu'au test d'association de mots, cette inégalité tend à être inverse chez les psychotiques".¹⁰

C'est ce qui distinque remarquablement nos deux groupes, et il en ressort que du point de vue quantitatif, c'est le deuxième sous-test du V.P.B. qui différencie le mieux les deux types de délinquants étudiés. Les temps de réaction beaucoup plus longs des délinquants sexuels indiquent un état d'inhibition de leurs processus mentaux associatifs; on peut présumer que pour plusieurs d'entre eux, cet état est en relation étroite avec une anxiété profonde et des mécanismes de défense répressifs.

En terminant cet exposé, il est intéressant de noter qu'une analyse spéciale du Rorschach à choix multiples confirme cette hypothèse d'une anxiété profonde chez les délinquants sexuels; nous avons dressé un psychogramme collectif de chaque groupe expérimental en nous servant d'une liste de déterminants établie par les auteurs, et nous avons trouvé une différence entre les sommes de déterminants "k", soit 23 pour le groupe S, et 8 pour le groupe V, avec une probabilité de hasard de moins de 1 pour-cent. (x2=6.32). On sait que les perceptions de "clair-obscur" caractérisées par ce déterminant, sont l'indice d'une anxiété diffuse et superficiellement contrôlée par des mécanismes de défense tels que l'isolation et la rationalisation. Tout porte à croire que cet état particulier aux délinquants sexuels résulte d'une lutte tenace entre leurs pulsions libidineuses prégénitales et les défenses rigides et inefficaces de leur super-ego. On établira sans difficulté la relation entre cette dernière interprétation dynamique et les observations qualitatives que nous avons rapportées plus haut sur le comportement du délinquant sexuel durant l'expérimentation.

Il ne nous semble pas arbitraire de conclure ici que la majorité des délits sexuels sont la résultante, ou mieux le symptôme d'une structure psychique névrotique ou pré-psychotique, souvent caractérisée par la présence d'une angoisse désorganisante. D'autre part, les résultats de cette recherche nous autorisent à voir dans la plupart des voleurs récidivistes, des individus qui réussissent à sauvegarder un équilibre psychique assez

frustre, mais relativement normal; on pourrait peut-être expliquer la majorité de leur comportment délinquant de la façon suivante: en ayant continuellement maille à partir avec la société, ils évitent d'entrer en conflit avec eux-mêmes et éliminent ainsi l'anxiété qui résulterait d'une telle lutte intérieure.

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This is an extract from a thesis submitted to the Institute of Psychology of the University of Montreal towards a Master of Arts Degree. Mr. Morin outlines an effort to work out a method of identifying those inmates coming into a correctional institution whose sexual adjustment may be a source of difficulty.

Some Dynamics in Open Type Correctional Institutions

WILLIAM T. LITTLE Superintendent Ontario Training Centre Brampton, Ontario

It goes without saying that the techniques employed in programming are different in maximum custodial institutions from those employed in minimum custodial settings.

What is not always so clear are the actual practices in minimum custodial settings that have been found to be sound from both custodial and treatment points of view.

In these settings a real responsibility falls on the administration to provide a well motivated training program that will employ the capabilities of the students gainfully during the time spent in the institution, while at the same time challenging their social thinking.

A higher ratio of successful rehabilitation has been found to result from those institutions that operate programs which permit inmates to live their lives similar to "outside" community social patterns. This, I believe, indicates the need for more study of the program dynamics of the open type institution.

Reasoning of this kind is far removed from punitive thinking and is predicated on the assumption that correctional institutions are treatment centres, not mere social disposal plants.

An open type institution cannot be both. It is a treatment centre or it cannot function as an open type institution.

One of the important dynamics employed at Brampton Training Centre is the use of a student representative council. This body consists of a president, secretary, and a representative from each of the seven residences.

All members are elected by their respective hall mates by secret ballot every three months.

A constitution and set of bylaws have been in operation for over five years, with a general revision of both within this period.

The Ontario Training Centre at Brampton was established to serve specially selected students who possess normal mentality, a limited criminal record, good motivation and a desire to learn.

The Council has a noon lunch meeting with the senior staff officials each Tuesday during which time any subject, bar none, is brought up for discussion.

The agenda has been prepared at a Student Council meeting held the previous evening by the Student Council members only.

The criteria used for decisions regarding subject matter under discussion is whether it is a good thing or a bad thing for the institution as a whole.

Discussions regarding quality, quantity and preparation of food, student and staff relations, program, maintenance and many other vital matters are freely discussed and recommendations made by the students.

It is interesting to note that contrary to many sceptics in the field of correction, the students bring a very practical and appreciative attitude to these meetings and never in my experience has there been a disagreeable incident or hostile division between students on one side and staff on the other.

This is not to say that vigorous discussion and keen debate do not take place, because on many subjects strong feelings and opinions are expressed by both staff and students.

As often as not, several staff members may line themselves in discussion with the points and views expressed by the men on the Council, and as often as not on other issues the men will be lined up behind staff proposals.

As a group, the men selected by the inmate population are a betterthan-average group of inmate students. They are, for the most part, men who take pride in their position as legitimately elected representatives, and are usually quite capable of presenting the problems of their respective areas in a clear and direct manner. Further, they are not the type to brook competition from would-be "big wheels" in dealing with institutional problems.

This clearing house for many irritations of prison life is one of the finest barometers for good institutional health that we have. Many a serious dislocation has been averted by the venting of feelings and ideas through the medium of the Student Council.

The inmate population will accept conditions imposed by regulations with good attitude and understanding if they are permitted the opportunity of discussion of the areas that are affected.

The therapeutic value to men serving on the Council will, I believe, go without saying. The experience, for example, of conducting the regular meetings in the accepted democratic manner, notably parliamentary pro-

cedure, does much to introduce many students to the proper methods of social problem solving.

The inmate Council should not be used as a sounding board for the superintendent, nor should mere lip service be paid to the right of the members to speak forthrightly on any subject without fear of retribution, for only under these circumstances will sincerity be inspired and the true work of the Council be made possible.

Not only does the Student Council prove itself worthwhile through the medium of its regular meetings, but possibly its greatest service is in the area of student guidance and general student control. This is exercised in a variety of ways.

The Council at Brampton feels a responsibility towards every student in the institution and has demonstrated this on many occasions.

The existence of a Student Council means team work between staff and student inmates towards the goals of successful rehabilitation. Without this student co-operation I believe there would be much to be desired in treatment progress and objectives at Brampton Training Centre.

No matter how skilled the sociological team of psychologist, social worker and psychiatrist may be, no matter how effective or kindly disposed the custodial and other staff are, an indispensable catalyst in the reform process must be the whole-hearted participation of the student inmate in the social functioning of the institution of which he is a part.

Through such participation the student is identifying himself consciously or otherwise with positive values which have in so many cases been non-existant in his social background. These values give him the beginnings of a social conscience whereby he may be reasonably expected to act like other citizens in society because he has been treated like one.

Le surintendant du Ontario Training Centre, de Brampton, discute des fonctions et de la valeur du conseil d'étudiants de cette institution.

Towards A Better Understanding Of Our Juvenile Delinquents

A. J. KITCHEN, Director of Corrections Manitoba

Address delivered to the General Secondary Section of the Manitoba Educational Association Convention, Easter 1957

In order to avoid any possible misunderstanding perhaps we should at the outset examine this very popular and much over-worked term "juvenile delinquent". Just what do you mean when you call someone a "juvenile delinquent"? As a matter of fact, I am bringing up the point right now because I am certain that we have not all got the same kind of person in mind when we speak of a "juvenile delinquent". Some people's idea of a juvenile delinquent is a very simple one. They brand a boy or girl a delinquent whose behaviour does not coincide with their own concept of what a juvenile's behaviour ought to be. To others a juvenile delinquent is a term synonymous with the term "teen-ager", a fact which I heartily deplore, as the idea does a grave injustice to thousands upon thousands of teen-agers whose conduct is for the most part exemplary. Even the strictly legal definition leaves something to be desired and I would join with many others in a protest against labelling as delinquent all those boys and girls to whom the legal definition would certainly apply. "The Juvenile Delinquents Act" defines a "juvenile delinquent" as

any child who violates any provision of the Criminal Code or any Dominion or provincial statute or of any by-law or ordinance of any municipality, or who is guilty of sexual immorality or any similar form of vice, or who is liable by reason of any other act to be committed to an industrial school or juvenile reformatory under the provisions of any Dominion or provincial statute.

Surely this covers too much ground for our discussion as it technically labels as "delinquent" those juveniles who violate such municipal by-laws as that which forbids "two on a bike", as the saying goes, or shooting with a B.B. gun at a tin can in your back yard and puts such juveniles technically in the same category as those who brutally assault an aged store-keeper for a few dollars and a couple of packages of cigarettes. How, then, can we identify the true delinquent? While it may narrow the field to decide the question on the basis of court appearance it cannot even safely be assumed that because a juvenile was in court he is, *ipso facto*, a "juvenile delinquent". The fact of the matter is that we have been far too free and easy in our use of the word "delinquent". It cannot be used

without qualification because delinquency is not an entity in itself. It is common fallacy to think of a "delinquent" in terms of a common set of facts or a special type of person and usually far removed from anything that would strike too close to home. However, there is no doubt in the minds of everyone here that there is such a person as a true delinquent whose behaviour is intolerable in any decent, law-abiding community. What yardstick, then, can we apply to juvenile behaviour to warrant the use of the term "juvenile delinquent"? The research staff of the Cambridge Somerville Youth Study, a ten-year project operating in two Massachusetts cities in an attempt to deal with the "pre-delinquent" child before he developed into an anti-social person, found it useful to analyze each case in terms of three essential ingredients: frequency, seriousness and attitude. Frequency of anti-social behaviour is significant because it indicates a pattern of behaviour. Seriousness, by which we mean the degree to which such behaviour is harmful to others, or even to the juvenile himself and is easily illustrated by listing such offences as theft, assault, indecent acts, robbery with violence, fraud, wilful damage, arson, etc., is important because, after all, the basic purpose of the machinery of justice is the protection of human rights. Last, and perhaps most important of all, and certainly most difficult to determine is the question of attitude. To a large degree a child's attitude towards authority and the rights of others determines his career as a "real" delinquent or a merely incidental one. In a world where conformity is vital to success a defiant attitude towards authority can easily gain sufficient momentum to carry a juvenile delinquent into adult criminality of serious proportions. These observations then, lead us to the conclusion that only by studying in individual cases the relevancy and inter-relationship of these three factors: frequency, seriousness and attitude can we answer the question "Who are the real delinquents"?

As with every other type of social problem that plagues society, there are a great many plans proposed as solutions to the problem of juvenile delinquency. But without adequate diagnosis, treatment is impossible no matter what the problem may be. Unfortunately, it is not as simple to diagnose and treat juvenile delinquency as it is to diagnose and treat many physical illnesses. Why not? Well, for one reason, there simply isn't any one cause of juvenile delinquency, nor even ten clearly identifiable causes that act independently of each other. That is why so many pet programs and solutions are in fact, no solution at all. Increased recreational facilities, abolishment of slum conditions, bigger and better schools, alleviation of poverty, might alleviate some of the more gross manifestations of delinquency but they do not touch the basic elements which produce the condition in the first place. Neither do restrictive or punitive measures such as curfew, censorship of reading material, television and radio programs, "punish the parent" or "back to the woodshed" campaigns. So

far as these measures are concerned, they merely affect the manner in which the delinquency will be expressed; they turn it into some other avenue of expression which, most unfortunately, is often mistaken for a cure. Despite all the soap-box orations promising the community deliverance in one fell swoop from the scourge of juvenile delinquency by the vigorous application of some panacea or another, the fact is that there is no *one* cure because there is no *one* cause. The multiple causation theory is the only logical explanation that has been advanced about juvenile delinquency, and it has but one fault. It has no spectacular headline appeal and the exponents of this theory, including the speaker, cannot guarantee a cure.

The most outstanding single contribution towards a better understanding of the juvenile delinquent is the research and experimentation in this field by Sheldon and Eleanor Glueck. The findings of a ten-year project comparing 500 true delinquents and 500 non-delinquents is reported in the volume "Unravelling Juvenile Delinquency".

Commencing on this research project in "Family Service Highlights"²

Dr. Eleanor Glueck says:

The delinquents and non-delinquents ranged in age from 11 to 17 and were matched, case for case, not only by age, but by residence in underprivileged areas, ethnic origin, and intelligence level. They were then systematically compared on 402 factors in their family and home backgrounds, school history, leisure-time interests; their developmental healthy history, their physical condition and body structure; their underlying characterial, personality and temperamental traits and the quality of their intelligence.

The delinquents as a group were found to differ markedly from the non-delinquents: (1) socioculturally, in having been reared to a far greater extent than the non-delinquents in homes of little understanding, affection, stability or moral fiber by parents usually unfit to be effective guides and protectors; (2) temperamentally, in being more restlessly energetic, impulsive, extroverted, aggressive, destructive (often sadistic); (3) in attitude, by being far more hostile than the non-delinquents, far more defiant, resentful, suspicious, stubborn, socially assertive, adventurous, unconventional, non-submissive to authority; (4) psychologically, in tending more than the non-delinquents to direct and concrete, rather than symbolic, intellectual expression, and in being less methodical than the non-delinquents in their approach to problems; (5) physically, in being essentially mesomorphic in constitution (solid, closely knit, muscular).

The evidence shows that despite the similarities in their neighbourhood environment, there was a substantial difference in the qualitative aspects of their homes. In the homes of the delinquents the ties among members of the family were not as close, the parents were less attached to each other and to their children, there was less stability in the family, there was less planfulness in the management of the home; less concern for the well-being of the children; less provision for home recreation. There was less of the "togetherness" that is reflected in family group activities.

Basic, then, to the understanding of the delinquent is some understanding of the connection between his inter-personal relationships and his behaviour. This fact is well emphasized by the following excerpt from "The National Conference on Prevention and Control of Juvenile Delinquency, 1946":

The home is the cradle of human personality. Each person, from the moment of birth, is deeply influenced by the people around him. The baby is born not knowing what to think or how to feel about life, but ready to learn, and learn he does, willy nilly. From a warm, loving, stable family, the child learns that people are friendly, worth knowing, and can be depended upon. When a family is cold, despairing, rejecting, or neglectful, the child learns distrust, hostility, or downright hatred of people. Such families are to be found in all economic, cultural, racial, national and educational background.

That there is a direct and tremendously important relationship between personality development and behaviour there is no doubt. What happens in the first six years of life is crucial in forming the basic structure of personality and while it may be possible to remedy at a later date some personality defects which develop in the early years the road to becoming a mature, socially responsible individual would be much smoother if these defects did not develop in the first place. Whether a person has a sense of trust in his fellows or is a suspicious, hostile, mistrusting individual, as so many true delinquents are found to be, depends primarily upon the kind of relationship that he has had with his parents, particularly his mother, in his early formative years.

If a child's early experiences with authority have been fair and just and authority has been imposed by an essentially warm, affectionate and loving parent, the acceptance of authority in later years poses no problem. Conversely, however, if a child's early contacts with authority have been inconsistent, unfair, unjust and imposed by a cold, rejecting, punitive parent, the child will in later years undoubtedly resist and fight authority wherever and whenever it comes in contact with authority and almost inevitably will sooner or later become delinquent. Under these circumstances, it is fairly easy to see that punishment and severe restrictions in themselves only serve to emphasize and confirm the delinquent's already

warped and hostile reaction to adult authority. The point, therefore, to be made is that it is impossible to understand behaviour, delinquent or non-delinquent, without a full realization of the all-important relationship between personality development and behaviour.

The development of delinquent behaviour patterns is a gradual process. It does not strike as a bolt of lightning out of a clear blue sky. Not infrequently the parents of children who come to the attention of the Juvenile Court for the first time claim to have been caught without previous warning that trouble was afoot. This assertion is seldom, if ever, found to be in accordance with the facts when the case is thoroughly investigated by a probation officer. Delinquent behaviour is foreign to the well adjusted, effectively functioning boy or girl who is achieving recognition, success and satisfactory social relationships. What, then are some of the symptoms which preceded the overtly delinquent act? The only satisfactory answer to that question lies in the multiple causation theory of juvenile delinquency. No only do casual factors overlap, they coincide and interact and form a very complex situation. Therefore it is only with a great deal of reluctance that I bow to the demands of time and space and single out for discussion only one symptom which is of particular interest to you as school teachers, namely: unsatisfactory adjustment at school.

Nowhere is there greater opportunity presented for the early discovery of maladjusted children than that presented to the schools. While it may be true that not all maladjusted children react in such a manner that their difficulties can be detected readily through their overt behaviour, nevertheless it cannot be denied that schools have a major responsibility for the discovery of maladjusted children because of the school's unique position, which facilitates observation and treatment. Schools, having an unparalleled opportunity to detect and correct minor maladjustments, can play a major role in preventing the development of more serious ones. To what social and academic areas can teachers look for signs of unsatisfactory adjustment at school? Perhaps the following factors, if checked by a teacher, would at least be helpful:

Age: Is adjustment to classmates made difficult because the student is so much older or younger than the average student in the class? So often we find the delinquent boy or girl is physically much bigger than his classmates, and very sensitive to the fact.

Intelligence: If a student is so dull he cannot compete, or so bright he is not interested in his classroom activities, trouble is almost certain to occur. The provision of special classes for the backward student and major work classes for the gifted student create some problems, while solving others, and I do not pretend to be aware of all the issues involved.

Reading: If a student cannot comprehend the reading material assigned for use in his class he is in difficulty right away. Reading is, I understand, the commonest cause of serious school trouble and the key to many a school problem. Many a child's reading deficiency creates the impression that he is backward and he comes to believe that this is so, and his parents and school teacher believe likewise. The habit of failure becomes fixed, with the resulting weakness in character and personality development and a fertile field for antisocial behaviour is created.

Truancy: On the surface the problem looks simple but, on the contrary truancy, like delinquency, is, in fact, a complicated problem. Truancy must not be confused with non-attendance. Many, in fact most, absentees are not truants in the true sense of the word. The arrival of the circus, an unusually good day for fishing, a parent's decision that a child must undertake a special errand, keep children from school and technically make truants of them but are normal and understandable reasons for occasional absence which do not worry However, for certain children absence from school is one symptom of mild or severe personality disturbance. To understand truancy we must understand that school has not the same meaning to all children. To some, school is a place of comfort, security, challenging new experiences and satisfying personal relationships, while to other children it can be a decidedly unfriendly place, full only of frustrating experiences and unreasoning demands to submit to conformity and authority. Thus we see that the major importance of truancy is that it identifies a child who may be in trouble or need.

Withdrawn or Aggressive Behaviour: In either case the danger signal has been hoisted. However, we should not overlook the very important fact that aggressive behaviour within limits is a valuable ingredient in personality development. Delinquent behaviour often stems from misdirected or unchannelled aggressiveness which needs to be understood both in terms of what the aggression means to the child himself and how it can be re-directed into socially acceptable channels.

Social Relationship: This factor may in a sense only be a refinement of the previous one but it is important enough to warrant special mention. It is a well-known fact that emotional disturbance can block learning. Inability to form meaningful social relationships is often the result of emotional disturbance and hence a teacher who has an eye and an ear which is sensitive to a child's "rapport" with classmates gains a further insight into the problem of unsatisfactory social adjustment.

The years between twelve and seventeen have been very aptly described as the "age of conflict" and it will be well worth our while to consider why this is so.

Of all the human beings on this earth the adolescents seem hardest for us to understand. They are certainly the ones that most often drive us to distraction and complete despair. They are harder to understand than the mind of a woman, and that covers a lot of ground! What, then are some of the problems and characteristics of this age group?

- 1. Perhaps the most distinguishing characteristic of adolescents is their rebelliousness, their hostility or resentment against the authority of their parents and teachers, which they once accepted without question. Parents often have great difficulty in giving up the role of authoritarian adults who have for so long attended to their children's physical needs and forbidden and comforted them for so many years. So often, unfortunately, parents interpret this rebellious behaviour as the worst possible kind of ingratitude and say so in the oft repeated phrase "after all I've done for you!" instead of recognizing it as part of the growing up process.
- This typical reaction on the part of their parents leads us to a second general characteristic of adolescents, a more or less continual state of anxiety, insecurity and confusion. They are worried by this revolt from parental authority and not infrequently feel inwardly guilty and hence become uncertain and confused about their proper relationship with adults, impelled as they are on the one hand to exert their freedom and independence and anxious and confused on the other hand about the possible consequences. The confusion is confounded by the conflicting demands which face the adolescent. This morning the adolescent is told "you are old enough to know better, act your age" but tonight the same adolescent is told "you are not old enough to do that" and so between being exhorted to be responsible, to make decisions, to show sound judgment, and then being expected to be submissively obedient to parents and teachers as a dutiful son or daughter, or student, the adolescent is kept in a continual state of uncertainty and anxiety as he or she struggles to form a new image of self as an emerging man or woman.
- 3. Almost as a means of solace or refuge from the difficulties which these two characteristics present, a third characteristic of adolescents emerges: that of seeking reassurance from their own peers and a marked tendency to become snobbish, members of gangs, to discriminate and exclude others. This development is a good defensive mechanism which both relieves anxiety and reassures the adolescent that he or she really belongs—a basic need of all of us. Thus all

adolescents have a feeling of strong loyalty and devotion to the group and they will do amazing things to belong to and win the approval of their peers.

- 4. In the struggle to escape from childhood and in the reluctance to face the forbidding prospect of becoming an adult, a fourth characteristic develops: an eagerness to win the approval of and be accepted by those just a little bit older. As a result they copy the dress, speech, mannerisms, conduct and expression or suppression of feelings of the group just a little bid ahead of them, to the despair of parents and teachers alike—and Court officials too, I might add!
- 5. Adolescents are characterized too by deep concern over their masculine or feminine roles, they wonder what they should or should not do, say or feel to win the approval of their own sex and acceptance by the opposite sex. Thus dating involves prestige, status, skill, and even to the successful daters can be a disturbing and frustrating activity and a source of acute anxiety and unhappiness to the unsuccessful.

The adolescent is, then, the essence of contradiction. He is at one and the same time chicken-livered and lion-hearted. He is happy as a lark and sad as an owl, slow as a tortoise and can run like a deer. He is blind as a bat and has the eye of a hawk, roars like a lion but coos like a dove, is dumb as an ox but sly as a fox. He acts like a dog in the manger but sticks his head in the sand like an ostrich. He has a mousy manner but the ferocity of a tiger. He's as gentle as a lamb but moves like a bull in a china shop. He is led like a sheep but struts like a rooster and is vain as a peacock. He chatters like a magpie, acts like a puppy and is playful as a kitten. He's variously described as a worm, a jellyfish, a louse, a rat and crazy as a bed bug. No wonder he's an enigma and a conundrum, even to himself.

Working with adults, then, poses special problems. How best can we help them through these admittedly difficult years? First of all, we must ever remember an adolescent is not a miniature adult. He is not an adult on a small scale. He is partly an adult, partly a child. Oftentimes he looks like an adult, acts like an adult, but then has surprising and alarming lapses into immaturity. Instead of scolding and exhorting adolescents all the time we can be more effective in our efforts to guard and guide them into adulthood by giving them reassurance and encouragement on the adult level and patience, tolerance and understanding on the childhood level. This latter suggestion must not be construed to mean a relaxing of discipline but a gradual release of unnecessary and often intolerable restrictions and prohibition and requirements that do not make sense to the adolescent who is half child, half adult.

Secondly, the adolescent has a special need to relate in an adequate and meaningful way to adults. What was heretofore an adequate and meaningful way to relate to adults is no longer satisfactory. His relationship with the parent figure is weakening at this point but at the same time the adolescent is going through a period of his life, when above all he needs to adequately identify with adults other than his parents, since he is trying to move into adulthood himself. All of us who represent authority to the adolescent pose a problem of parent identification and we must realize that it colours our relationship with adolescents with whom we come in contact.

Thirdly, the adolescent needs to understand himself. Their inconsistent, impulsive behaviour is disconcerting even to themselves. They have so many conflicting impulses: to love; to hate; to be generous; to be selfish; to be childish; to be mature; to be dependent, to be independent—that they need help in recognizing this confusion as a normal growth pattern which does not set them apart from their age group but, on the contrary, identifies them with their age group. The adolescent is having feelings which he never had had before—feelings which are not only due to growing sex development but also to his growing sense of social responsibilities. For example, adolescents are becoming increasingly concerned about what they will do occupationally and the tremendous importance of vocational choice is pressing upon them; the first fleeting thoughts of the business of choosing a life partner; trying to work out a philosophy of life—all these things are crowding the thoughts of adolescents and they need help in sorting them out.

Fourthly, adolescents need moral guidance. They are at a questioning, doubting, wondering age. Many things they previously accepted they now begin to question, sometimes to the utter dismay of their parents. During adolescence they almost always undergo a period of disillusionment about parents, and marriage; about family life, about religion, government, law and order. Adolescents are usually highly critical of their elders and have enough experience to see behind the sham of adult behaviour and to realize the insincerity, the dishonesty, the chicanery that goes on in the adult world. During this very unsettled and disillusioning period they need moral guidance and, in my opinion, such guidance cannot come from an adult who himself has no personal dynamic religious faith. Religion gives us all an adequate frame of reference and points out the basic issues of life.

In conclusion, then, it is my contention that the focus of any successful effort "Towards a Better Understanding of our Juvenile Delinquents" must be aimed at a thorough understanding of the whole individual and his life experiences as best they can be reconstructed. This cannot be accomplished apart from understanding the tangled web of emotional

relationships within the family unit because in the last analysis human conduct is the end result of human contact.

Dans son allocution aux instituteurs du Manitoba, M. Kitchen parle de la délinquance, de son origine et de ce que peuvent faire les écoles pour résoudre ce problème.

¹ Glueck, Sheldon and Eleanor. Unravelling Juvenile Delinquency. Cambridge: Harvard University Press, 1950.

² Family Service Association of America. Family Service Highlights. New York: June 1956

Drug Addiction in Ontario

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Background

It has been estimated that slightly more than three thousand people of both sexes are addicted to narcotics in Canada as a whole.

A breakdown of this figure indicates that there are about 2,364 criminal addicts, 515 medical addicts, and 333 professional addicts, making a total of 3,212.

In the first of these groups we find those people who patronize the illicit market and support trafficking in drugs. The second group is made up of people who at some time or other required narcotics because of their medical condition, and as a result became addicted to them. The third group is comprised of certain professionally trained people who had drugs available to them at work and so became addicted.

Of all the drugs available, heroin appears to be the most commonly employed for addiction in Canada at the present time. One ounce of heroin legally imported into our country would cost \$12. When this amount is sold illegally by capsules containing approximately one-quarter grain at \$3 to \$5 per capsule, it will retail at somewhere between \$5,200 and \$8,70. With such profits available to those who are prepared to traffic in narcotics, we can, I think, expect that the problem of treating people who have become addicted will remain with us for a very long time.

As a matter of fact, addiction to narcotics goes back to man's earliest recorded history. A description of the cultivation and preparation of opium was found on clay tablets left by the Sumerians which have been dated some seven thousand years B.C. The Egyptians, Persians and Greeks (all of whom were very advanced in pharmacology) also knew opium and used it medically.

To put our subject in perspective, we believe that there are about seven hundred persons in Ontario who are addicted to narcotics.

Fortunately, few young people in Canada have developed this habit. Of the 2,364 addicts who are known through their criminal records, only twenty-six are under twenty years of age. There are some indications, however, that the lower age limit may be dropping.

Despite the fact that we have an extensive coastline in British Columbia, the general trend of distribution of these drugs would appear to be from the East to the West coast, which suggests that drugs will follow their market and are not found where they are because of geographical location. To the best of our knowledge, drugs are carried both ways across the border.

Marihuana does not appear to be a problem in Canada and narcotic drugs of any kind are not a matter of concern in rural areas.

There is no evidence which indicates that innocent, unwilling people are in any way dragged or forced into drug addiction. For the most part it appears to result from associating with people who are already addicted and usually unemployed. Again speaking generally, it has been found that about seventy-five per cent of the drug addicts with criminal records had records before they became addicted to narcotics. This finding should do much to correct the impression that addiction to narcotics starts people on criminal careers.

No economic class appears to be immune from addiction. Almost all types of occupational backgrounds are to be found. Personal wealth, of course, permits some addicts to escape detection because they are in a position to pay others to take the risk of getting their drugs for them.

I am happy to say that convictions for breach of the Narcotic Drug Act in Ontario are about fifty per cent less today than they were ten years ago.

A comprehensive study of narcotic addiction in Canada may be found in the published findings of a special Senate Committee which investigated this whole matter in 1955. Copies are available through the Queen's Printer in Ottawa, Ontario.

Types

What type of person do we find among criminal addicts? Without attempting any breakdown of personality types, certain general impressions come to mind. They have become slaves to drugs and live for little else. Drugs come before not only their own welfare, but the welfare of their wives and children. Friends are used and then forgotten. Their personal health, cleanliness and clothing become matters of indifference. They have no place in society and do not lead a useful existence. They have few morals and do not stick too closely to the truth.

As individuals, they usually have weak personalities. While they frequently have average intelligence or better, they are emotionally immature. They constantly seek pleasure and live to satisfy their immediate needs. Little thought is given to the future. They are restless, impatient, often untrained and undisciplined people who tend to be selfish and lacking in both moral standards and a sense of responsibility. Their tastes are frequently expensive and their vocational goals are not uncommonly either unrealistic or beyond their proved capabilities.

Contrary to popular opinion, addiction to narcotics inhibits physical activity, whether it be criminal or non-criminal, and tends to deter any impulses the individual may have to commit violent crimes. The effect of opiates are, in general, the opposite of the effects of alcohol which tends to reduce normal inhibitions and to release aggressions.

The Clinic

In January 1956, the Department of Reform Institutions of Ontario completed the construction of an H-shaped, brick, single-story, twenty-five bed clinic where treatment could be given to people who were completing the sentences imposed upon them by the courts. One section of the clinic contains its offices and kitchen, another several small open dormitories and the third the occupational therapy unit. The clinic is self-contained and has its own site. While decorations and furnishings are plain, they are bright and the atmosphere is cheerful. Openings are of a security type, but one is not too conscious of this either inside or outside the building.

The limited number of custodial staff at the clinic are in uniform. Treatment is provided by a team made up of a minister, a psychologist, a psychiatrist, an occupational therapist, specialists in the addictions, and a rehabilitation officer. A registered nurse and a doctor are on call at all times.

The clinic was conceived by the Reverend Major John Foote, V.C., when he was the Minister of our Department, and developed largely under the direction of Dr. F. H. van Nostrand who was, until his retirement, this past summer, our Director of Neurology and Psychiatry. Both of these men deserve credit for pioneering this type of treatment in a penal setting in Canada.

Some general observations might be made at this point about the clinic. Being small in size, with a limited number of patients, it is almost constantly faced with the problem of boredom slipping in, even though patients are only there for the last three months of their sentence. Its limited size limits the number of facilities which can be provided to relieve this situation and yet it must be relieved if therapy is to be effective. The second general problem in administering a unit of this kind is the attitude and relationship of the custodial staff towards both the patients and the professional staff and their objectives.

As you know, narcotic addicts form one of the least well understood groups among inmates undergoing sentence. They are clannish, bright, critical and intolerant of most penal routine. As a result, the custodial staff look upon them with a good deal of suspicion and convey the impression that they are not to be trusted, that they are lazy, poorly motivated and have a poor prognosis. Such an attitude is, of course, bound to have its impact upon patients and upon the treatment staff as well.

Selection

When we opened our narcotic clinic, its patients had to be chosen from inmates who requested treatment, at any institution in the Province where they might be undergoing sentence. Since then, they are all sent to one institution to serve the preliminary part of their sentences and this has proved advantageous. The clinic's function can now be more adequately explained, and screening has become more uniform because it is being done by the same experienced team.

Before the clinic was built, I had some apprehension about the number of drug addicts who might request treatment because most that I had talked to did not seem so inclined. Since its opening, however, I am glad to say I have been proved wrong. The majority now seek treatment, although all who apply are not accepted for it.

We are still unable to set up specific standards of selection, but a number of factors appear more frequently in our reasons for rejection than any others. The first is a long history of unsatisfactory behaviour while serving previous sentences. This is likely to continue in the clinical setting to an intolerable degree. The second is insincere motivation. This type of person is so openly critical of treatment procedures, and so sceptical of their value, that he influences his fellow patients to such an extent that group therapy techniques tend to dry up and lose much of their usefulness.

Selection of our patients is made by a three-man classification committee which is made up of the institution's superintendent, its senior custodial officer and its psychologist. Physical, psychological and psychiatric reports on each applicant are read by the committee before it interviews the applicant. As the treatment period is for the last three months of the applicant's sentence, selection is made in time to effect transfer to the clinic for that period of time. This means that patients are constantly coming and going and a revolving program is required so that all may derive equal benefit from it.

Initial success caused us to reduce our selection standards and admit more patients to subsequent groups. However, experience taught us that we had to tighten up again and we have just gotten to the point where we feel we can accept more for treatment.

Treatment

Group therapy, individual therapy, occupational therapy and vocational guidance are all used by our treatment team.

In terms of need, we find that, as a group, drug addicts need encouragement, assistance in formulating goals and constant stimulation to get them to follow through. They have little tenacity in their work habits

and possess values so different from the normal that they are not always easy to understand. Improvement, if it is going to come at all, is usually evident in the first two weeks to a month. By then they offer less excuses. Their defenses begin to break down and they start to work more steadily. There is evidence by then of greater creativity and more independent thinking. It is usually the men who come to us who are over forty-five who are most receptive to treatment. By then they have reached a degree of maturity which enables them to look in the mirror honestly and see clearly the effects and futility of their old way of life. When family relationships exist they can be valuable aids in rehabilitation.

It would be difficult to say which aspect to our treatment program is the most helpful. What helps one may not help another. We must remember not only the varied backgrounds of these patients but all that they have been through. Their relationship to those in authority has usually been a long and distasteful one. They have spent too much time in institutions and have become institutionalized. Lack of family ties gives them a sense of isolation which one must have experienced to fully understand. Their lives have been organized around their need to find drugs. When they first come to the clinic their hostility towards authority is most evident. But after about a two-week stay they begin to relax and growth starts. Those who have to be taken off treatment usually lack motivation or cannot adjust to the clinical environment and what is expected of them there. A. B. Chester's book entitled Shot Full, or the Autobiography of a Drug Addict is one which should be read by everyone who wishes to increase his understanding of this type of person.

As the use of occupational therapy in a penal setting is rare, perhaps something might be said here about its value. In a general way it relieves tension and provides variety and a change of pace in the clinical program, but it goes much deeper and achieves much more than that. It helps patients understand themselves and their problems better. Instead of relying on verbalizing, occupational therapy provides a chance to do things. It may uncover talents that have never been discovered and provides the socially inadequate person with the very kind of tools he has always lacked in his social adjustment.

May I add a few words also about the treatment need of these patients as a whole. Psychotherapy may give him a better understanding of himself and why he uses drugs. But he needs much more than that. He needs training. He needs social acceptance. He needs vocational opportunities, and he needs to give up old friends who are addicts and to make new ones who are not.

To achieve such results, obviously, clinics require the facilities to attain these objectives. But something more is needed as well and that is a change in attitude on the part of the general public towards the drug

addict who is trying once more to learn to live without narcotics. I am convinced that if we are prepared to offer any drug addict our friendship in these circumstances he may need little more. There is as big a part for the Good Samaritan to play in the world today as there ever was.

After Care

One full-time rehabilitation officer is attached to our clinic and some twenty others are located throughout the Province to care for the patients' needs after their release. The clinic's rehabilitation officer has about ten pre-release interviews with each patient and follows up his progress for at least a year after discharge. Usually released addicts are seen about twice weekly during the first few months. Unless the legal restrictions of a parole sentence pertain, these services are voluntary. About thirty percent of our narcotic patients welcome it. To the others it is a matter of indifference or they quickly disappear.

We have found that because of the public's attitude towards addicts it is necessary for the rehabilitation officer to take the patient to a prospective employer and let him sell his services himself. When our rehabilition officers seek positions on their behalf they are greeted almost always with refusals. This attitude appears to spring from lack of information and the fears people have about the possible consequences of employing addicts.

Drug addiction, of course, tends to break up family life, so unsatisfactory home situations are usually found. When this is not the case, one often finds that the wife is also addicted and this inevitably adds to the problems of rehabilitation. Through loneliness many male addicts then turn to prostitutes for companionship and by boosting her services provide their joint support. But the one hundred dollars per day so earned is usually all spent the same day to satisfy their needs and take care of a meagre existence.

For the most part, our patients have a good attitude towards work when they leave the clinic and wish to be gainfully employed. However, their desire to start at the top, to earn more than they are capable of, and to get the kind of work that is not open to them are all attitudes which the rehabilitation officer must face and change.

It is of utmost importance that addicts be placed well away from the influence of old addicted companions and that sort of environment. Without exception, every patient of ours who has relapsed after treatment has done so with former friends who were still addicted. A parole sentence of at least one year and preferably two would be a most desirable aid to rehabilitation.

Two critical stages have been noted in the rehabilitation of these patients. The first comes on their first day out. They are tense, hopes are high and the desire to celebrate is strong. Celebration may take place

with a woman, a bottle, or both, and if release is not found they may turn to drugs. The second hazard comes if employment is not immediately found. As this period of uncertainty becomes longer, tension mounts and then discouragement and hopelessness creep in. It is during such critical times as these that a good rehabilitation officer can be of invaluable help.

Conclusions

- If we are going to attempt to rehabilitate people who are addicted to narcotics more than psychotherapy must be offered in the clinical program.
- To effect successful rehabilitation with this type of patient, he must be placed away from other addicted people on discharge.
- 3. Since our clinic opened we have succeeded in rehabilitating about twenty per cent of our patients. What does this mean? Royal Canadian Mounted Police recently made a study of the files of more than two thousand narcotic addicts who had gone through their hands, and they found that one hundred per cent of the people who had been convicted for breach of the Narcotic Drug Act had had subsequent convictions.

In other words, if nothing is done for the drug addict while he is undergoing sentence he will continue to use drugs on release.

M. Potts, chef psychologiste du Ontario Department of Reform Institutions, donne une description de la clinique pour le traitement des toxicomanes dirigée par ce départment.

After Care Pre-Release Preparation of Prison Inmates

D. C. S. REID, Executive Assistant John Howard Society of Ontario Toronto, Ontario

Conclusion — the second of two parts.

A list of standard post-release problems has been compiled for ready use during interview. These are listed as follows:

1. Employment:

- (a) An inability to use constructively the job-placing services in the community such as the National Employment Service
- (b) Disillusionment about the employment situation, i.e., lack of job, and length of job hunting process
- (c) Inability to find work, to sell oneself to an employer
- (d) When in employment, inability to face up to employer and barter for the best working arrangements
- (e) General feelings of insecurity in employment, such as fear of employees, someone coming in off the street and facing him, and fear of police visit to the employer
- 2. Economic insecurity over the period from release to first pay
- 3. The securing of accommodation
- Recovery from the initial period of confusion, depression and mental disorientation
- 5. The resumption of normal family and marital relationships and the difficulties that ensue
- 6. The pressure to acquire material effects, particularly clothing
- 7. The establishment of social relationships
- 8. The constructive use of leisure time
- 9. The fear of finding himself back with the "rounders"
- 10. Handling his drive for acceptance
- Dealing with returning cycles of depression and lack of progress as first planned, and frustration in some cases at being unable to make any headway

- 12. Hostile attitude towards authority, particularly the police
- 13. Pre-conviction debts, both financial and social
- Problems of fantasy thinking and fabrication, such as inability to tell
 a straight story to employers, after care workers, family and friends
- 15. How to use counselling effectively
- 16. How to handle the over-confidence that comes with the first pay
- 17. Bonding and licensing
- 18. The doldrum period

Some of these problems will be referred to in greater detail as they relate to the inmate-worker relationship.

These problems or adjustment situations, as part of the total rehabilitation picture, are obscured in the client's mind by the immediacy of his material needs. Anxiety about survival needs is a barrier to the consideration that he can give the broader implications of his rehabilitation, which, in the long run, will help decide his future liberty and freedom. Unrealistic though he may be regarding these intangibles, he is quite realistic about the immediates. When anxiety is relieved by assurance of agency help, he is free to consider these other problems. The after care agency, as the final stage in the rehabilitation process, is just another link in the chain that relies heavily on the work done with the man in the stages which preceded it. The after care agency, however, begins its particular part in the rehabilitative process with the man in that period just prior to release. In the first instance, it devolves upon the prison staff in general and the classification officer in particular to make some interpretation of the agency program to the inmate. The inmate's attitude may have been conditioned by years of contact with the correctional process or by the propaganda and hearsay stories of the prison community. So the classification officer may have already worked through this veneer to the second layer of problems created primarily by the fact that the inmate has been institutionalized. It is because of this institutionalization that he is now facing the standard post-release problems which have been outlined previously. If the inmate can grasp the significance of all these problems he can then perhaps become sensitive to the third layer of problems, which are called the basic personality or emotional ones causing the delinquency in the first place. Because of these two barriers it is perhaps very seldom that the third level is reached. If treatment stops at the first two levels, then it could be said to have been reaching symptoms only and not causative factors. This is not to say, however, that an adjustment based upon symptomatic clearance is necessarily a negative one. The anxiety factor that is created or raised when the veneer is lifted is usually the first line of defence of the inmate in protecting himself against the sore spots of his more basic problems. Therefore, one can see that while the classification officer has a responsibility to make a general interpretation of agency program, sufficient to effect a referral or a pre-release interview, the agency has a responsibility to see that the inmate does receive an adequate and realistic interpretation of just what he might expect from the agency.

Once a client has accepted the assurance of help with his immediate economic adjustment upon release, he can begin to consider with the worker the various problems that will come with the subsequent and more complete adjustment. These have been listed above but a full discussion of them is not possible here. One problem will be outlined in some detail as an example of how these interpretations may have helped prepare an inmate for release.

The Resumption of Normal Family and Marital Relationships

It is quite a common occurrence in the pre-release interview for a married man to belabour the evils of his fate, complaining that he cannot possibly go straight because he cannot make enough money to support his wife and children. To assume such support immediately is a formidable task to be faced, but invariably it takes on a new meaning for the client if certain dynamics can be interpreted to him. Very few prisoners view the wife as a person who has demonstrated quite clearly that she can support herself and/or her children during her husband's period of custody. If she can be presented to him as the person who has carried out the male role of provider, while his position has been reversed in that he has been occupying the female role by being provided for (while in prison), the whole readjustment process takes on a new perspective. He can then understand certain specific resistances his wife might be inclined to show upon his return to her. These can be interpreted as an unwillingness on her part to transfer the supporting function back to him who, in the past, because of his recidivism, has only been able to provide on an intermittent basis. This interpretation has the further value of conveying to him that his wife is a person who has feelings about things, and that these are feelings of which the worker is aware. It also helps as an unspoken explanation to him, that the worker understands his feelings in the reassumption of his normal social relationship.

Within the family circle, a man may have also to reassume the role of father. If he tends to exercise the authority of a father figure before his children are ready to accept it, the ensuing rejection may further estrange his relationship to family. Such explanations as this are usually not considered by the married inmate who lives an insulated life in prison. If they have been thought about the inmate has usually suppressed them

as being too unpleasant to face. The inmate in interview, therefore, is usually quite relieved to have the opportunity to talk through such a problem with a knowledgeable source of help.

The observations of after care correctional workers lead one to conclude that a man released from prison manifests behaviour which is thought to be the result of two pressures. The first pressure arises from desperate fears that his efforts to gain food and shelter will fail, and the anticipation of the feelings of futility and hopelessness lest these needs not be met. The second pressure arises from his adjustment to the prison environment which he has just left, wherein it has been necessary for him to defensively obliterate his normal sense of time. The results of this conditioning stay with the ex-inmate in the immediate post-release period, so that his time sense becomes distorted, and the resultant situational anxiety continues. These two pressures coincide to produce in the consciousness of the ex-inmate an urgent drive for immediate action. This state of mind or tension will be called "The Immediacy Complex" in this paper.

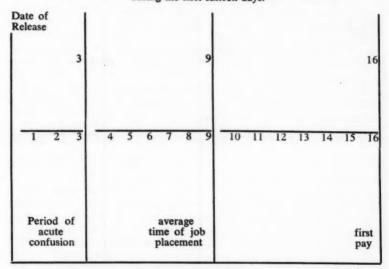
A Mechanical Interview Aid

A specific device has been developed to aid in combatting the immediacy complex. The device is the Time Projection Chart, and operates as a valuable aid in helping the client to let down his defences in the pre-release interview. Two different charts are used in the interview situation, and they help to project the client with the future allowing for a more realistic discussion. Time Projection Chart Number One is designed to facilitate discussion of proposed or probable activity of the client in the first two or three weeks, and is measured in days. Time Projection Chart Number Two is designed to illustrate activity over a period of weeks and is marked off in sixteen weeks. These charts have a further value of bringing the client to consider the existence of many other problems.

The use of these charts creates anxiety as it uncovers other problems. They cut across many problems, but centre chiefly in the initial stages on the problem of economic insecurity. Inmates are helped to consider some of the minutae of larger problems by the use of these charts. These minutae might be as follows:

- 1. Where will he sleep the first night?
- 2. How much money does he think he will spend en route home?
- 3. How will he spend his leisure time at night?
- 4. How will he put in the discouraging hours every day until he finds a job?

used in Pre-release Interview as a Projecting Technique to help client foresee pressures of his rehabilitation plan during the first sixteen days.

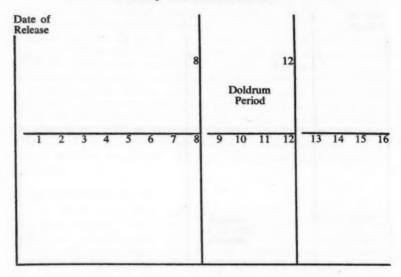


These charts also have a secondary value in that they uncover many misconceptions that the inmate might have about the community, and also what he thinks the community might have about him. They therefore provide an entree for interpretation regarding many of the activities in which he will engage when going straight.

Construction of Time Projection Charts

Chart Number One is laid out on a plain eight-by-eleven letter size sheet. It consists of a straight horizontal line divided into sixteen equal intervals, representing days. Point "O" begins the date of release to freedom. There are three main divisions on the chart, at the third, ninth and sixteenth days respectively. The first division point is to indicate the end of the period characterized by the immediacy complex wherein confusion and conflict are evident. This is the period when the ex-inmate is recovering from the sudden physical release to freedom and is effecting a psychological release to freedom by adjusting to his new environment. While this period varies in length from ex-inmate to ex-inmate it is observed that usually the more blatant symptoms of it have faded within three days. The second division point at the ninth day is to indicate the average

used in Pre-Release Interview as a Projecting Technique to help client foresee pressures of his rehabilitation plan during the first sixteen weeks.



length of time that it takes an ex-inmate to find a job. This figure was arrived at from a survey of a community caseload in 1954. Of twenty-five cases surveyed it was found that an average of nine days elapsed between the date of release and the date at which the average client started work. The third division is at the sixteenth day and is to depict the earliest that the first pay can be expected if the pay day coincides with the period of one week following starting work.

Time Projection Chart Number Two likewise consists of a horizontal straight line on a piece of eight-by-eleven paper and divided off into sixteen equal intervals depicting weeks. Point "O" represents the date of release. Two division points are marked at the eighth and the twelfth week, and the interim space is marked "doldrum period". This is the period when the average client in the after care setting seemingly achieves a state of normalcy wherein the new routine which he has just adopted becomes monotonous, boring and perhaps without purpose. In the experience of the after care workers this is the second major critical time period when recidivism is most likely to take place.

Use of Time Projection Charts

These charts are used in interview only if it is felt that the inmate has the capacity and interest to follow visual interpretation in this manner. It would appear that these charts work more specifically for the recidivists, who have experienced the post-release period before. While this is true from the point of view of experiential understanding, it is noted that the first or accidental offender appears to have an intuitive ability to comprehend the existence of these pressures through the use of this projective technique. Another factor on which their use is dependent is the positive reaction to the agency's interest during the second phase of the pre-release interview. A further factor is the existence of a definite relationship having been established in the interview wherein the inmate feels that the agency does have knowledge and experience to share with him and which he can use, and where the worker feels the inmate has a definite desire to partake of this knowledge.

Time Projection Chart Number One

On Chart Number One the first two or three days are pointed out as usually being characterized by confusion, differing in intensity and degree depending upon the individual person. This is the period of ambivalence. It is a period when the yearning for personal identification and a sense of belongingness, such as he knew in the prison community, is still present. The unconscious wanting to find the same on the outside is the motivating drive. This anxiety period is the time when the desire to go straight either becomes crystallized, or frustration drives him to seek easy company as a solution to this problem. The threat of this ambivalence is so strong that it motivates the client into one of two courses of action, either to "go straight" or "go to the corner". Invariably the inmate relates to the description given him of this period from the chart and usually with a show of emotion or comment, indicates a satisfaction that there is someone who really understands how desperate he feels about the immediate post-release period.

For some inmates in the pre-release interview, however, the problems of economic insecurity take on such large proportions that his negative feelings regarding the use of agency money to aid with his plan, interferes with his seeing the real constructive use of agency service. To this kind of client who unrealistically clings to his independence, and who wants to try it fully on his own, an early contact with the agency is urged and the Time Projection Chart used to illustrate how he can use the agency's planning and consulting service. The inmate is usually advised that he can preserve his independence better by contacting the agency the day after his release while he still has his gratuity money in his pocket. He can thereby benefit from the vast experience gained by the agency in helping men'plan, and so his money will probably last longer. It is also repre-

sented that if his money is not going to suffice, then he and the worker can anticipate this and plan for the point when agency money can take over. The use of the chart in this way relieves the inmate of the feeling that he will be begging; he then is more willing to live within the limitations of assistance offered. In this way the chart contributes to his better understanding of agency program, and hastens the development of a relationship of trust with the agency. The second division sign on the Time Projection Chart Number One indicates the average length of time it takes a client to find employment. Using this figure usually has a crushing effect on the inmate and creates a feeling of futility and hopelessness. This is usually followed by a tirade of hostility from him against society in general, the John Howard Society and National Employment Service in particular, for not providing what he thinks are adequate jobfinding facilities. The use of the chart in this regard, then, can be seen as a definite anxiety-provoking technique wherein the inmate is helped to assert his negative feelings. This allows the worker to handle these feelings within the framework of the casework interview wherein they can be channelled and understood.

In helping the inmate to establish why he had the expectation of a job from society, it is interesting to observe that the attitude is usually based upon his own anxiety and fear about the future, which in turn is reinforced by certain misconceptions. These misconceptions are thought to be based in the mores of the prison community wherein regurgitated penalogical theories are repeated as fact. Articles in the penal press and other magazines about foreign penal systems are usually confused with information regarding our own correctional system. This attitude also includes false understanding of the services of the after care agency. When the inmate has been able to explore the existence of these feelings through use of the chart it is then not too difficult to interpret to him the realities he will be facing in regard to the job-hunting process. Some inmates are able to absorb this interpretation and when this is the case usually there comes also an understanding of the supportive role of the John Howard Society agency during the post-release period. Thus emerges the first real understanding of the counselling process.

The chart also serves as an instrument to reveal more detailed characteristics of the man's attitude to employment. When an attempt to interpret the reality situation to an inmate fails, he usually restates more emphatically his need to begin work immediately. He fears any period of idleness, and expresses a desire to bury his whole self in a work situation. Thus employment can be seen to have other connotations for him than the remunerative and creative aspects. In the after care situation, this type of client is the one who usually plans on having two jobs or another part-time job at least, if he is unable to arrange overtime at the initial job. This

type of reaction reflects the fact that this type of man is trying to convince the worker of his own worth and that his intentions are good. Generally it may be said that this type reveals himself as doubting his own worthfulness, as basically an insecure person, unable to trust other people or himself. The third division on Time Projection Chart Number One is marked "The first pay". This division is a theoretical one based on the assumption that a client will get a first pay exactly one week after he starts work. The assumption is so made for discussion purposes only. A need for some discussion and interpretation centered around the first pay is felt necessary because of a recurring phrase or statement heard in interview. It is usually to the effect that "I need help until I get my first pay".

Time Projection Chart Number Two

The second chart is measured in weeks and is designed to help the inmate view his future progress in long term perspective. On this chart he can see that the period of economic dependency on the agency, about which he was so fearful, is reduced to a very small entity. Most of this chart, then, will show the inmate as a self supporting person, and thus much of this tension and anxiety is relieved. This relief is quite noticeable in interview and manifests itself quite often in the nature of a revelation to the inmate. The resultant feeling of equality is noticeable and his worthiness in the eyes of the agency emerges. It is at this time that the interpretation of the value of future periodic contacts after the first pay, say fornightly, with his worker is explained as helping him to measure his progress. During this interpretation the standard reaction is "sure, if a guy has someone to whom he can go and talk, it sure helps". While this may be a "con" reaction, the use of this phrase indicates a momentary understanding of the agency's goal to help him become an independent person. There is reason to doubt, however, that this understanding remains for very long in the maximum security prison. As the inmate returns to the reality of the prison life after the pre-release interview, the old anxieties and conflicts are regenerated as he ceases to be an individual, and is forced to re-identify with the convict group.

This chart also serves as a medium to interpret what is commonly referred to by John Howard Society workers as "the doldrum period". This usually occurs, as observed by these workers, around the eighth to twelfth week after work starts. In this period the client is achieving a state of normalcy in that many of his old fears and anxieties have been cast aside as his economic security becomes more stable. At this point also some of the old and more basic problems come to the fore, and the client then must decide to meet and understand these or to continue his former escape pattern from them. These problems may be concerned with difficulties in personal relationships, the use of leisure time, and just plain loneliness. This is the time that the client's lack of purpose and goals

breed discontentment with his lot. It is this period that the loneliness of the never-never land of going straight emerges with all its coldness and sterility. Usually this period is characterized by the client's intermittent contacts with the associates in the ex-con group, and less contact with the more stable groups within society.

It is very difficult to interpret this period in the interview and is more likely a better subject to be put over until a second interview. It is felt valuable to mention it, however, to further illustrate to the inmate that the agency is interested in his total rehabilitation, and that contact can continue up to a year's time or more.

One can readily see how the agency could become involved in an intensive pre-release preparation program with one man. Such intensity would require more than one interview. In this setting the worker is forced to be selective and to choose particular cases for intensive treatment. It is out of such cases that the material for this paper has been assembled. Furthermore, the solution to adequate pre-release preparation lies not only within the man's personality. It lies partially within his family constellation, and the community to which he is destined. Their understanding and acceptance of him are vital factors. It follows then, that contacts and pre-release preparation with family as a desirable part of this program would require a further expansion of the institutional work.

The question might well be raised as to what differences are created by a private agency providing after care service. The public agency, together with its rehabilitation grant to the inmate as a right, would stimulate dynamics quite dissimilar to those outlined in this paper. However, this paper outlines the program which one agency has developed in its after care services to the point where it reaches the man while he is still serving sentence, and begins erecting the bridge between community and prison. That this bridge is an effective and vital process is borne out by the reactions of John Howard Societies who receive men referred to them. The referral system worked out by the Ontario Society is based on defined channels of communication by the Provincial office, and a ready acceptance by branches of any referrals made. In this way, the referrals require a minimum of advanced consultation. The prisoner can be assured of initial community acceptance, and a community agency can be assured that its prospective client is aware of the services available.

GUIDES FOR JUVENILE COURT JUDGES. New York: National Probation and Parole Association, 1958.

The preface of this book states, "the manual was written by juvenile court judges themselves—a document produced in the crucible of judicial experience, and focused on a major social problem of our times". This book is applicable in its entirety to the juvenile court judges of Canada, even though it was written by judges of the United States. It deals with the problems of both the metropolitan and rural juvenile courts.

The manual consists of 127 pages divided into fourteen chapters. The first chapter deals with "History and Philosophy". The following chapters deal with such subjects as "Administration", "Police and Children", "Intake", "Detention", "Social Study", "Court Hearings", "Disposition and Treatment", "Probation", "Community Resources", and ends with "The Judge". It is a condensed and complete study and discussion of the fundamental principles of juvenile court work. The basic problems are dealt with in a very realistic manner. Probation officers will find the contents to be very pertinent to their duties and of value to them in understanding the functions of the court.

Every conscientious juvenile and family court judge should read and study this manual. There is a responsibility placed upon each juvenile court judge to have a reason for each disposition. The result derived would be that more consideration would be given to each case. This book brings home the fact that the result of the disposition of the juvenile case is the responsibility of the judge. If such disposition is a failure, the onus is placed on the judge to ascertain, if at all possible, the reason for the failure.

Juvenile court judges owe a debt of gratitude to the National Probation and Parole Association for this very fine treatise. To my knowledge this book is the best to date on this subject. "Guides for Juvenile Court Judges" is deserving of the attention of every juvenile court judge.

JUDGE W. S. GARDNER, Q.C.

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FAMILY RELATIONSHIPS AND DELINQUENT BEHAVIOUR. By F. Ivan Nye. New York: John Wiley & Sons, Inc. 1958. pp. 168. Price \$4.95.

In studying the delinquent within the general population rather than in the correctional institution, the author has focused upon the parentadolescent relationship as it appears to the adolescent as having an important influence on his behaviour. The modus operandi was to administer questionnaires to a sample of Grades-Nine-to-Thirteen school children in three small cities and to inmates of a boys' training school. Correlations and associations were used to analyse the data with the Chi square as a test of the significance of differences.

Family structure (e.g., broken home, spatial mobility, socio-economic status, church attendance) and parent-child relationships (e.g., rejection of and by the child, parental discipline, family recreation, parental character and disposition, responsibility and freedom afforded the child) were shown to be related to delinquent behaviour.

This research was orientated by a predilection for social control theory—social control being defined in terms of external restrictions and punishments, conscience, affectional identification with parents and other non-criminals, and the availability of alternate means to goals and values.

The author claims: "A considerable number of relationships between family attitudes and behaviour and delinquent behaviour have been tested which provide support for or against social control theory. A large majority of these, significant and non-significant, are in the direction supporting theory". But are adolescents' responses to questionnaires really indicators of family relationships? Can confessed peccadilloes be so construed as to constitute a scale of juvenile delinquency? Or is the questionnaire at best an unvalidated and unreliable personality inventory?

The stand that most violations of the "norms" occur as the result of ineffective social control devices for securing conformity is as informative and logically unassailable as the conclusion that suicides occur because they are not prevented. But the disconcerting liability of the social control theory is the depersonalization of man and the excessive relegation of animal norms to the service of social ones. For example, observe the debilitative inertia of the gem on page 51: "Mutual mother-father recreation, financial generosity towards the mother, and father helping with the housework without being asked are all related to least delinquent behaviour, presumably because of their relationship to marital happiness". Since when is harmony happiness?

And for that matter, since when is juvenile delinquency synonymous with non-conformity? The author's reluctance to acknowledge the repercussions of social control on mental health and his good-laws-make-good-people panacea suggest that he tilts not against delinquency per se but against individualism in toto. A perspective such as this invariably leads

to suggestions for the ethical brainwashing of delinquent individualists (page 157).

At least the book is consistent with its own stifling tenets.

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STANDARDS AND GUIDES FOR THE DETENTION OF CHIL-DREN AND YOUTH. New York: National Probation and Parole Association, 1958. pp. 142. Price: \$2.00.

The NPPA, concerned over the inadequate facilities at present being used for the detention of children awaiting trial, has produced a book which describes in some detail what its authors consider to be necessary requirements in programme, staff, building, etc., if the detention home is to be used as part of the treatment process and not merely a lock-up.

The dangers of using jails to house children, of attempting to use a building for the dual purpose of detention and shelter, of using detention homes as a dumping ground pending police investigation, or as a transit camp or holding unit for training schools, are well described. Indeed, Part I, "Cardinal Concepts of Detention", is a brief but clear survey of both the values and the defects of detention homes, and states succinctly the need for this type of service.

In stating this need the authors do not fall into the trap of urging public authorities to build detention homes without first ascertaining whether they are in fact a necessity to the particular locality concerned, and very wisely sound the warning that detention homes can be too large. This is salutary, for the tendency of any authority, after having spent large amounts on capital cost, is to make the utmost use of it, to keep it fully occupied. This could mean that children who should be in some other form of refuge are being detained in order that the authorities could get full return on their investment. Part 2, dealing with admission procedures, stipulates safeguards concerning intake which need to be stated if the home is to be used for its intended purpose solely.

It is Part 3 of the book, dealing with the concrete aspects of detention care, e.g. staffing, supervision, treatment, programming, which may cause readers in Canada to raise their eyebrows—in envy or in doubt. The capital costs of the type of building suggested, and the cost of maintaining the facilities concerned, are tremendous. A high staff/student ratio is unavoidable when maximum security and skilled treatment are both sides of the same penny, but when it is considered that 4.36 persons are required

to staff one position (exclusive of holidays and sick leave), when professional personnel almost exclusively are employed, and when it is recommended that salaries should be *considerably* higher than salaries for those in comparable positions in other institutions, one becomes a little apprehensive of the amount of money involved. On the basis of the figures given and the facilities described, the capital cost of a sixty bed home would be in the region of \$1 million; the annual expenditure would hardly be less than \$400,000.

It may be that expenditures of this magnitude are commonplace in the U.S. due perhaps to the combination of a bigger reservoir of public moneys and a greater interest in penology—in which case we may be forgiven our envy. If, however, this is not the case, then the standards set down can be considered as ideal standards which may not be achieved for many years.

To accept this fact is not in any way to detract from the value of the book; the ideal cannot be stated often enough in order that our imaginations may be fired and in order that we do not fall into the trough of false

content, and while we may envy those who can afford this kind of facility, envy will not get us any more money. We in Canada must do a better job of informing the public of the magnitude and complexity of the delinquency problem in order that more financial assistance will be forthcoming.

The authors have completed an onerous job with courage and with thoroughness, and every aspect of detention home care is considered. To any public authority concerned with building an adequate facility of this type, the book should be required reading.

One small quibble in conclusion. In any book outlining what must be so nearly the ideal picture, there should be no room for the statement that "school rooms for crafts should be available after school hours provided the children can be properly supervised" (italics mine). With the staffing ratio outlined as above, such provision should be an essential and not conditional upon anything. Considering that the average stay is ten days, this aspect of the programme could be more important from a therapeutic viewpoint than the academic programme which to some extent must be a stopgap affair.

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